

PeopleSoft®

PeopleSoft 8.8
Human Resources PeopleBook:
Base & Benefits

December 2002

PeopleSoft 8.8
Human Resources PeopleBook:
Base Benefits
SKU HRMS88BBN-B 1202

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About This PeopleBook

PeopleBooks provide you with the information that you need to implement and use PeopleSoft applications.

This preface discusses:

- PeopleSoft application prerequisites.
- PeopleSoft application fundamentals.
- Related documentation.
- Typographical elements and visual cues.
- Comments and suggestions.
- Common elements in PeopleBooks.

Note. PeopleBooks document only page elements that require additional explanation. If a page element is not documented with the process or task in which it is used, then either it requires no additional explanation or it is documented with common elements for the section, chapter, PeopleBook, or product line. Elements that are common to all PeopleSoft applications are defined in this preface.

PeopleSoft Application Prerequisites

To benefit fully from the information that is covered in these books, you should have a basic understanding of how to use PeopleSoft applications.

See *Using PeopleSoft Applications*.

You might also want to complete at least one PeopleSoft introductory training course.

You should be familiar with navigating the system and adding, updating, and deleting information by using PeopleSoft windows, menus, and pages. You should also be comfortable using the World Wide Web and the Microsoft Windows or Windows NT graphical user interface.

These books do not review navigation and other basics. They present the information that you need to use the system and implement your PeopleSoft applications most effectively.

PeopleSoft Application Fundamentals

Each application PeopleBook provides implementation and processing information for your PeopleSoft database. However, additional, essential information describing the setup and design of your system appears in a companion volume of documentation called the application fundamentals PeopleBook. Each PeopleSoft product line has its own version of this documentation.

The application fundamentals PeopleBook consists of important topics that apply to many or all PeopleSoft applications across a product line. Whether you are implementing a single application, some combination of applications within the product line, or the entire product line, you should be familiar with the contents of this central PeopleBook. It is the starting point for fundamentals, such as setting up control tables and administering security.

Related Documentation

This section discusses how to:

- Obtain documentation updates.
- Order printed documentation.

Obtaining Documentation Updates

You can find updates and additional documentation for this release, as well as previous releases, on the PeopleSoft Customer Connection Website. Through the Documentation section of PeopleSoft Customer Connection, you can download files to add to your PeopleBook Library. You'll find a variety of useful and timely materials, including updates to the full PeopleSoft documentation that is delivered on your PeopleBooks CD-ROM.

Important! Before you upgrade, you must check PeopleSoft Customer Connection for updates to the upgrade instructions. PeopleSoft continually posts updates as the upgrade process is refined.

See Also

PeopleSoft Customer Connection Website, <http://www.peoplesoft.com/corp/en/login.asp>

Ordering Printed Documentation

You can order printed, bound volumes of the complete PeopleSoft documentation that is delivered on your PeopleBooks CD-ROM. PeopleSoft makes printed documentation available for each major release shortly after the software is shipped. Customers and partners can order printed PeopleSoft documentation by using any of these methods:

- Web
- Telephone
- Email

Web

From the Documentation section of the PeopleSoft Customer Connection Website, access the PeopleSoft Press Website under the Ordering PeopleBooks topic. The PeopleSoft Press Website is a joint venture between PeopleSoft and Consolidated Publications Incorporated (CPI), the book print vendor. Use a credit card, money order, cashier's check, or purchase order to place your order.

Telephone

Contact CPI at 800 888 3559.

Email

Send email to CPI at psoftpress@cc.larwood.com.

See Also

PeopleSoft Customer Connection Website, <http://www.peoplesoft.com/corp/en/login.asp>

Typographical Conventions and Visual Cues

This section discusses:

- Typographical conventions.
- Visual cues.

Typographical Conventions

The following table contains the typographical conventions that are used in PeopleBooks:

Typographical Convention or Visual Cue	Description
Bold	Indicates PeopleCode function names, method names, language constructs, and PeopleCode reserved words that must be included literally in the function call.
<i>Italics</i>	Indicates field values, emphasis, and PeopleSoft or other book-length publication titles. In PeopleCode syntax, italic items are placeholders for arguments that your program must supply. We also use italics when we refer to words as words or letters as letters, as in the following: Enter the number <i>O</i> , not the letter <i>O</i> .
KEY+KEY	Indicates a key combination action. For example, a plus sign (+) between keys means that you must hold down the first key while you press the second key. For ALT+W, hold down the ALT key while you press W.
Monospace font	Indicates a PeopleCode program or other code example.
(quotation marks)	Indicate chapter titles in cross-references and words that are used differently from their intended meanings.

Typographical Convention or Visual Cue	Description
. . . (ellipses)	Indicate that the preceding item or series can be repeated any number of times in PeopleCode syntax.
{ } (curly braces)	Indicate a choice between two options in PeopleCode syntax. Options are separated by a pipe ().
[] (square brackets)	Indicate optional items in PeopleCode syntax.
& (ampersand)	When placed before a parameter in PeopleCode syntax, an ampersand indicates that the parameter is an already instantiated object. Ampersands also precede all PeopleCode variables.
(ISO)	Information that applies to a specific country, to the U.S. federal government, or to the education and government market, is preceded by a three-letter code in parentheses. The code for the U.S. federal government is USF; the code for education and government is E&G, and the country codes from the International Standards Organization are used for specific countries. Here is an example: (DEU) If you're administering German employees, German law requires you to indicate special nationality and citizenship information for German workers using nationality codes established by the German DEUEV Directive.
Cross-references	PeopleBooks provide cross-references either below the heading See Also or on a separate line preceded by the word <i>See</i> . Cross-references lead to other documentation that is pertinent to the immediately preceding documentation.

Visual Cues

PeopleBooks contain the following visual cues.

Notes

Notes indicate information that you should pay particular attention to as you work with the PeopleSoft system.

Note. Example of a note.

A note that is preceded by *Important!* is crucial and includes information that concerns what you must do for the system to function properly.

Important! Example of an important note.

Warnings

Warnings indicate crucial configuration considerations. Pay close attention to warning messages.

Warning! Example of a warning.

Comments and Suggestions

Your comments are important to us. We encourage you to tell us what you like, or what you would like to see changed about PeopleBooks and other PeopleSoft reference and training materials. Please send your suggestions to:

PeopleSoft Product Documentation Manager PeopleSoft, Inc. 4460 Hacienda Drive Pleasanton, CA 94588

Or send email comments to doc@peoplesoft.com.

While we cannot guarantee to answer every email message, we will pay careful attention to your comments and suggestions.

Common Elements in These PeopleBooks

As of Date	The last date for which a report or process includes data.
Business Unit	An ID that represents a high-level organization of business information. You can use a business unit to define regional or departmental units within a larger organization.
Description	Enter up to 30 characters of text.
Effective Date	The date on which a table row becomes effective; the date that an action begins. For example, to close out a ledger on June 30, the effective date for the ledger closing would be July 1. This date also determines when you can view and change the information. Pages or panels and batch processes that use the information use the current row.
Once, Always, and Don't Run	Select Once to run the request the next time the batch process runs. After the batch process runs, the process frequency is automatically set to Don't Run. Select Always to run the request every time the batch process runs. Select Don't Run to ignore the request when the batch process runs.

Report Manager	Click to access the Report List page, where you can view report content, check the status of a report, and see content detail messages (which show you a description of the report and the distribution list).
Process Monitor	Click to access the Process List page, where you can view the status of submitted process requests.
Run	Click to access the Process Scheduler request page, where you can specify the location where a process or job runs and the process output format.
Request ID	An ID that represents a set of selection criteria for a report or process.
User ID	An ID that represents the person who generates a transaction.
SetID	An ID that represents a set of control table information, or TableSets. TableSets enable you to share control table information and processing options among business units. The goal is to minimize redundant data and system maintenance tasks. When you assign a setID to a record group in a business unit, you indicate that all of the tables in the record group are shared between that business unit and any other business unit that also assigns that setID to that record group. For example, you can define a group of common job codes that are shared between several business units. Each business unit that shares the job codes is assigned the same setID for that record group.
Short Description	Enter up to 15 characters of text.

See Also

Using PeopleSoft Applications

PeopleSoft Process Scheduler

PeopleSoft Human Resources Base Benefits Preface

This preface discusses:

- PeopleSoft application fundamentals.
- PeopleBook structure.

Note. This PeopleBook documents only page elements that require additional explanation. If a page element is not documented with the process or task in which it is used, then either it requires no additional explanation or it is documented with common elements for the section, chapter, PeopleBook, or product line.

PeopleSoft Application Fundamentals

The *PeopleSoft Human Resources PeopleBook: Base Benefits* provides you with implementation and processing information for your PeopleSoft Human Resources Base Benefits system. Additionally, essential information describing the setup and design of your system appears in a companion volume of documentation called *PeopleSoft Application Fundamentals for HRMS PeopleBook*. Each PeopleSoft product line has its own version of this documentation.

PeopleSoft Application Fundamentals for HRMS PeopleBook consists of important topics that apply to many or all PeopleSoft applications across the PeopleSoft HRMS product line. No matter which PeopleSoft HRMS products you are implementing, you should be familiar with the contents of this central PeopleBook. It is the starting point for fundamentals, such as setting up control tables and administering security.

See Also

PeopleSoft 8.8 Application Fundamentals for HRMS PeopleBook, “Getting Started With PeopleSoft HRMS”

PeopleBook Structure

PeopleSoft PeopleBooks follow a common structure. By understanding this structure, you can use this PeopleBook more efficiently.

Chapters	Description
Preface	This is the chapter you're reading now. It explains: • How to use the Application Fundamentals book. • How PeopleBooks are structured. • Common elements that are used in the PeopleBook. For example, if a data field is used on multiple pages, it might be defined only once in this chapter rather than repeatedly throughout the book.
Getting Started With...	This chapter discusses product implementation guidelines. It explains: • The business processes documented within the book. • Integrations between the product and other products. • A high-level guide to how our documentation maps to the overall implementation process; it doesn't offer step-by-step guidance on how to perform an actual implementation.
Understanding...	This is an introductory chapter that broadly explains the product and the functionality within the product.
Setup and Implementation	This can be one or more chapters. These chapters contain documentation to assist you in setting up and implementing the product. For example, if functionality X is part of a product, this chapter would be devoted to explaining how to set up functionality X, not necessarily how to use functionality X. You would look to the corresponding business process chapter to learn how to use the functionality. Note. There may be times when a small amount of business process information is included in a setup chapter if the amount of business process documentation was insufficient to create a separate section in the book.

Chapters	Description
Business Process	This can be one or more chapters. These chapters contain documentation that addresses specific business processes with each chapter generally devoted to a specific functional area. For example, if functionality X is part of a product, this chapter would be devoted to explain how the functionality works, not necessarily how to set up functionality X. You would look to the corresponding setup and implementation chapter to learn how to set up the functionality. Note. There may be times when a small amount of setup and implementation information is included in a business process chapter if the amount of setup and implementation documentation was insufficient to create a separate chapter in the book.
Appendixes	(optional) If the book requires it, one or more appendixes might be included in the book. Appendixes contain information considered supplemental to the primary documentation.
Reports Appendix	(optional) This appendix contains an abbreviated list of all of the product's reports. The detailed documentation on the use of these reports is usually included in the related business process chapter.

CHAPTER 1

Getting Started With PeopleSoft Human Resources Base Benefits

This chapter provides an overview of PeopleSoft Human Resources Base Benefits business processes and discusses:

- PeopleSoft Human Resources Base Benefits business processes.
- PeopleSoft Human Resources Base Benefits implementation tasks.

PeopleSoft Human Resources Base Benefits Business Process

The following is a list of the PeopleSoft Human Resources Base Benefits business processes:

- Set up foundation benefits information.
- Enroll in benefits.
- Manage COBRA.
- Bill for benefits.
- Administer FMLA.
- Administer NDT.
- Interface with providers.
- Administer FSA.

Implementing PeopleSoft Human Resources Base Benefits

The PeopleSoft Human Resources Base Benefits table-loading implementation can be divided into three phases: global, core, and additional. You set up tables to enable your system to support PeopleSoft Human Resources Base Benefits features.

The Base Benefits table-loading implementation includes setting up the following:

- PeopleSoft HRMS fundamental tables.
- Base Benefits application tables.

- Additional Base Benefits application tables.

In the planning phase of your implementation, take advantage of all PeopleSoft sources of information, including the installation guides and table-loading sequences.

Important! The order in which you set up tables required to implement PeopleSoft Human Resources Base Benefits may vary; each individual application isn't necessarily set up in sequence. For example, you may set up HRMS tables, then tables for the Base Benefits core application, then several tables specific to the country or industry you operate in, followed by additional Base Benefits core tables. In addition, the order in which you set up tables may also depend on the features you want to use. The information provided in this chapter offers a high-level guide of how our documentation maps to the overall implementation process; it doesn't offer step-by-step guidance on how to perform an actual implementation.

Setting Up PeopleSoft HRMS Fundamental Tables

The Base Benefits business process requires the setup of fundamental HRMS tables, common to multiple HRMS applications. The information that you define on these tables lays the foundation for the Base Benefits business process setup.

Step	Reference
1. Set up PeopleSoft HRMS fundamental tables.	<i>PeopleSoft 8.8 Application Fundamentals for HRMS PeopleBook</i> , "Getting Started With PeopleSoft HRMS"
2. Set up PeopleSoft Human Resources fundamental tables.	<i>PeopleSoft 8.8 Application Fundamentals for HRMS PeopleBook</i> , "Getting Started With PeopleSoft HRMS"
3. If you are using PeopleSoft Global Payroll, set up the Global Payroll application.	<i>PeopleSoft 8.8 Global Payroll PeopleBook</i> , "Getting Started With PeopleSoft Global Payroll"
4. If you are using PeopleSoft Payroll for North America, set up the Payroll for North America application.	<i>PeopleSoft 8.8 Payroll for North America PeopleBook</i> , "Getting Started With PeopleSoft Payroll for North America"
5. If you are using PeopleSoft Payroll Interface, set up the Payroll Interface application.	<i>PeopleSoft 8.8 Payroll Interface PeopleBook</i> , "Getting Started With PeopleSoft Payroll Interface"

Setting Up Core PeopleSoft Human Resources Base Benefits Tables

The steps discussed in this section suggest an order in which you define information in your core PeopleSoft Human Resources Base Benefits tables. The information that you defined in your global tables lays the foundation for this setup.

Setting up these core tables prepares your system to support these business processes:

- Benefit Enrollments
- 403(b) and 457 Savings Plan Limit Calculations
- Nondiscrimination Testing
- FMLA Processing
- Leave Plan Management

- Vacation Buy/Sell Plans Management
- COBRA Processing
- Retroactive Benefit Management
- Benefits Billing Management
- Benefits Data Extraction
- Multiple Job Management

Generally, organizations implement these business processes first. We discuss these business processes in the business process chapters of this PeopleBook.

Step	Reference
1. Define benefit providers.	<i>PeopleSoft 8.8 Application Fundamentals for HRMS PeopleBook</i> , “Setting Up Vendors”
2. Define coverage codes.	Chapter 3, “Setting Up Core Human Resources Base Benefits Tables,” Setting Up Coverage Codes, page 14
3. (USF) Define FEGLI codes.	Chapter 3, “Setting Up Core Human Resources Base Benefits Tables,” Setting Up FEGLI Codes, page 17
4. Define group coverage codes for life insurance and accidental death and dismemberment plans.	Chapter 3, “Setting Up Core Human Resources Base Benefits Tables,” Setting Up Coverage Group Codes, page 16
5. Define the service rate table.	Chapter 3, “Setting Up Core Human Resources Base Benefits Tables,” Setting Up the Service Step Table, page 18
6. Define the rate tables and premium limits.	Chapter 3, “Setting Up Core Human Resources Base Benefits Tables,” Setting Up Rates and Premium Limits, page 21
7. Define calculation rules.	Chapter 3, “Setting Up Core Human Resources Base Benefits Tables,” Setting Up Calculation Rules, page 26
8. Define limits for savings plans.	Chapter 3, “Setting Up Core Human Resources Base Benefits Tables,” Setting Up Limits for Qualified Savings Plans, page 36
9. Define leave and vacation plan earnings codes.	Chapter 3, “Setting Up Core Human Resources Base Benefits Tables,” Setting Up Leave and Vacation Buy/Sell Earnings, page 42
10. Define special accumulators.	Chapter 3, “Setting Up Core Human Resources Base Benefits Tables,” Setting Up Special Accumulators, page 35
11. Define benefit deduction codes.	Chapter 3, “Setting Up Core Human Resources Base Benefits Tables,” Setting Up Deduction Codes, page 33
12. Define benefit plans.	Chapter 4, “Setting Up Benefit Plans,” Defining Benefit Plans, page 49
13. Define health plans.	Chapter 4, “Setting Up Benefit Plans,” Setting Up Health Plans, page 51

Step	Reference
14. Define life and accidental death plans.	Chapter 4, “Setting Up Benefit Plans,” Setting Up Life Insurance and Accidental Death Plans, page 52
15. Define disability plans.	Chapter 4, “Setting Up Benefit Plans,” Setting Up Disability Plans, page 54
16. Define savings plans.	Chapter 4, “Setting Up Benefit Plans,” Setting Up Savings Plans, page 56
17. Define FMLA plans.	Chapter 4, “Setting Up Benefit Plans,” Setting Up FMLA Plans, page 64
18. Define FSA plans.	Chapter 4, “Setting Up Benefit Plans,” Setting Up FSA Plans, page 67
19. Define retirement plans.	Chapter 4, “Setting Up Benefit Plans,” Setting Up Retirement Plans, page 68
20. (USA) Define U.S. pension plans.	Chapter 4, “Setting Up Benefit Plans,” Setting Up U.S. Pension Plans, page 70
21. (CAN) Define Canadian pension plans.	Chapter 4, “Setting Up Benefit Plans,” Setting Up U.S. Pension Plans, page 70
22. Define leave plans.	Chapter 4, “Setting Up Benefit Plans,” Setting Up Leave Plans, page 61
23. Define vacation buy/sell plans.	Chapter 4, “Setting Up Benefit Plans,” Setting Up Leave Plans, page 61
24. (Optional) Define dependent relationship codes.	Chapter 7, “Entering Dependent and Beneficiary Information,” Setting Up Dependent Roles, page 114

Setting Up Additional PeopleSoft Human Resources Base Benefits Tables

Follow these steps to define information in additional PeopleSoft Human Resources Base Benefits tables. The information that you defined in your global tables has laid the foundation for this PeopleSoft Human Resources Base Benefits-specific setup.

Setting up these additional tables prepares your system to support these business processes:

- Nondiscrimination Testing
- FMLA Processing
- COBRA Processing
- Retroactive Benefit Management
- Benefits Billing Management
- Benefits Data Extraction
- Multiple Job Management

These additional tables support business processes that your organization may choose to implement later in your implementation cycle. We discuss these business processes in the business process chapters of this PeopleBook.

Step	Reference
1. Define a special accumulator for highly compensated earnings to perform nondiscrimination testing.	<i>PeopleSoft 8.8 Payroll for North America PeopleBook</i> , "Defining Earnings Codes and Earnings Programs," Defining How Earnings Codes Affect Leave Accruals and Special Accumulators
2. Link that special accumulator to the appropriate earnings.	<i>PeopleSoft 8.8 Payroll for North America PeopleBook</i> , "Defining Earnings Codes and Earnings Programs," Defining How Earnings Codes Affect Leave Accruals and Special Accumulators
3. Define the nondiscrimination testing rules.	Chapter 10, "Performing Nondiscrimination Testing," Setting Up Test Criteria and Plans, page 153
4. Activate FMLA Administration by selecting the FMLA Administration check box under the Benefits Functions group box located on the Installation Table - Product Specific page to use FMLA process.	<i>PeopleSoft 8.8 Application Fundamentals for HRMS PeopleBook</i> , "Installing PeopleSoft HRMS," Entering Product- and Industry-Specific Installation Information
5. Activate COBRA by selecting the COBRA Administration check box under the Benefits Functions group box located on the Installation Table - Product Specific page to implement COBRA.	<i>PeopleSoft 8.8 Application Fundamentals for HRMS PeopleBook</i> , "Installing PeopleSoft HRMS," Entering Product- and Industry-Specific Installation Information
6. Define the COBRA parameters on the Benefit Program Table.	Chapter 4, "Setting Up Benefit Plans," Defining Benefit Plans, page 49
7. Define the COBRA event rules.	Chapter 6, "Setting Up Additional Human Resources Base Benefits Features," Setting Up COBRA Administration, page 95
8. Activate Retroactive Benefits and Deductions by selecting the check box under the Benefits Functions group box located on the Installation Table - Product Specific page to implement Retroactive Benefits and Deductions.	<i>PeopleSoft 8.8 Application Fundamentals for HRMS PeopleBook</i> , "Installing PeopleSoft HRMS," Entering Product- and Industry-Specific Installation Information
9. Define retroactive benefit programs.	Chapter 6, "Setting Up Additional Human Resources Base Benefits Features," Setting Up Retroactive Benefits and Deductions, page 107
10. Define rules for setting up mass retroactive benefit and deduction requests.	Chapter 6, "Setting Up Additional Human Resources Base Benefits Features," Setting Up Retroactive Benefits and Deductions, page 107
11. Activate benefits billing by selecting the check box under the Benefits Functions group box located on the Installation Table - Product Specific page to implement Benefits Billing.	<i>PeopleSoft 8.8 Application Fundamentals for HRMS PeopleBook</i> , "Installing PeopleSoft HRMS," Entering Product- and Industry-Specific Installation Information
12. Define the billing parameters	Chapter 6, "Setting Up Additional Human Resources Base Benefits Features," Setting Up Billing Parameters, page 94
13. Define the data to extract from the HR database to send data to benefit providers regarding employee enrollment information.	Chapter 19, "Sending Benefit Information," page 273
14. Define the rules for multiple jobs if you have employees that have more than one job at the same time.	Chapter 6, "Setting Up Additional Human Resources Base Benefits Features," Setting Up Multiple Jobs, page 104

CHAPTER 2

Understanding Base Benefits

This chapter provides an overview of PeopleSoft Human Resources Base Benefits and describes how to:

- Integrate with other PeopleSoft products.
- Design your benefits program.
- Set up support tables and benefit plans.

PeopleSoft Human Resources Base Benefits

PeopleSoft Human Resources Base Benefits provides you with the tools you need to manage your employee benefit programs. It enables you to set up your basic benefits system architecture and manually enroll employees and their dependents into the benefits system. This comprehensive benefits management solution supports a full range of benefit programs and plans, and provides you with everything you need to maintain your benefit records and to respond to inquiries from decision makers, managers, and other employees.

PeopleSoft Human Resources Base Benefits Features

With the HRMS Base Benefits business process you can:

- Define the tables that will be used to build your benefit programs.
- Manually enroll employees and dependents into a benefit program.
- Perform nondiscrimination testing to determine whether or not your U.S. organization is in compliance with government regulations.
- Print HIPPA reports.
- Track and manage FMLA requests.
- Calculate accrued leave awards and maintain employee leave balances.
- Manage 403(b) savings plans.
- Manage vacation buy and sell programs.
- Administer COBRA coverage for qualified participants and their dependents.
- Process retroactive benefits and deduction.
- Send enrollment data to third-party administrators.

- Send FEHB data to the OPM.

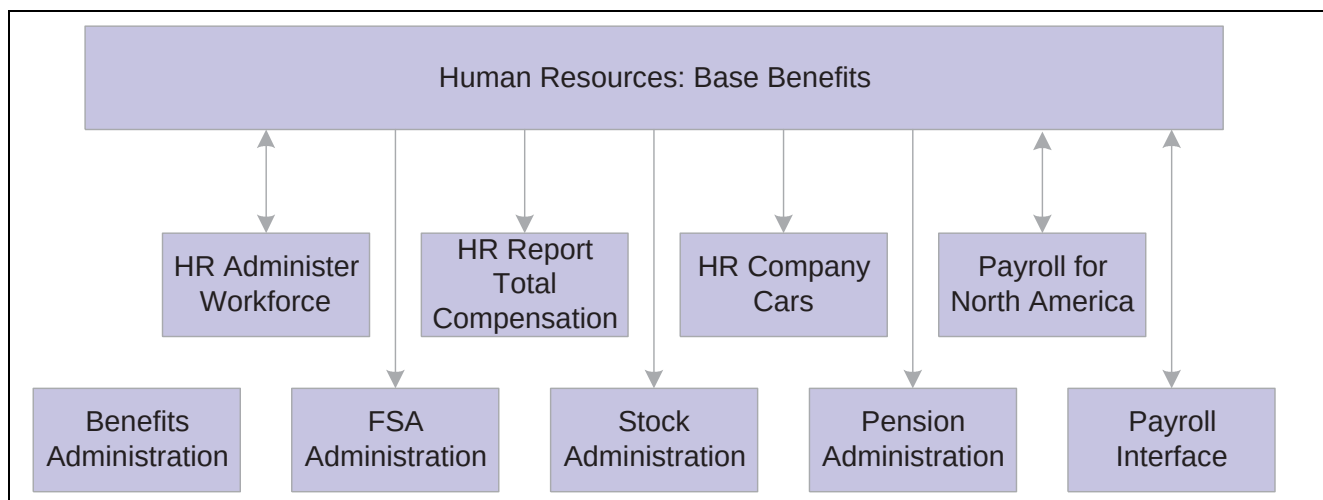
See Also

PeopleSoft 8.8 Benefits Administration PeopleBook, “Getting Started With PeopleSoft Benefits Administration”

PeopleSoft 8.8 FSA Administration PeopleBook, “Getting Started With PeopleSoft Flexible Spending Administration”

Integrating With Other PeopleSoft Products

PeopleSoft Human Resources Base Benefits integrates with the following PeopleSoft applications:



PeopleSoft Human Resources Base Benefits integration flow with other PeopleSoft applications

We cover integration considerations in the implementation chapters in this PeopleBook.

Supplemental information about third-party application integrations is located on the PeopleSoft Customer Connection Website.

See Also

PeopleSoft 8.8 Application Fundamentals for HRMS PeopleBook, “Understanding Enterprise Integration Points in HRMS”

Designing Your Benefits Program

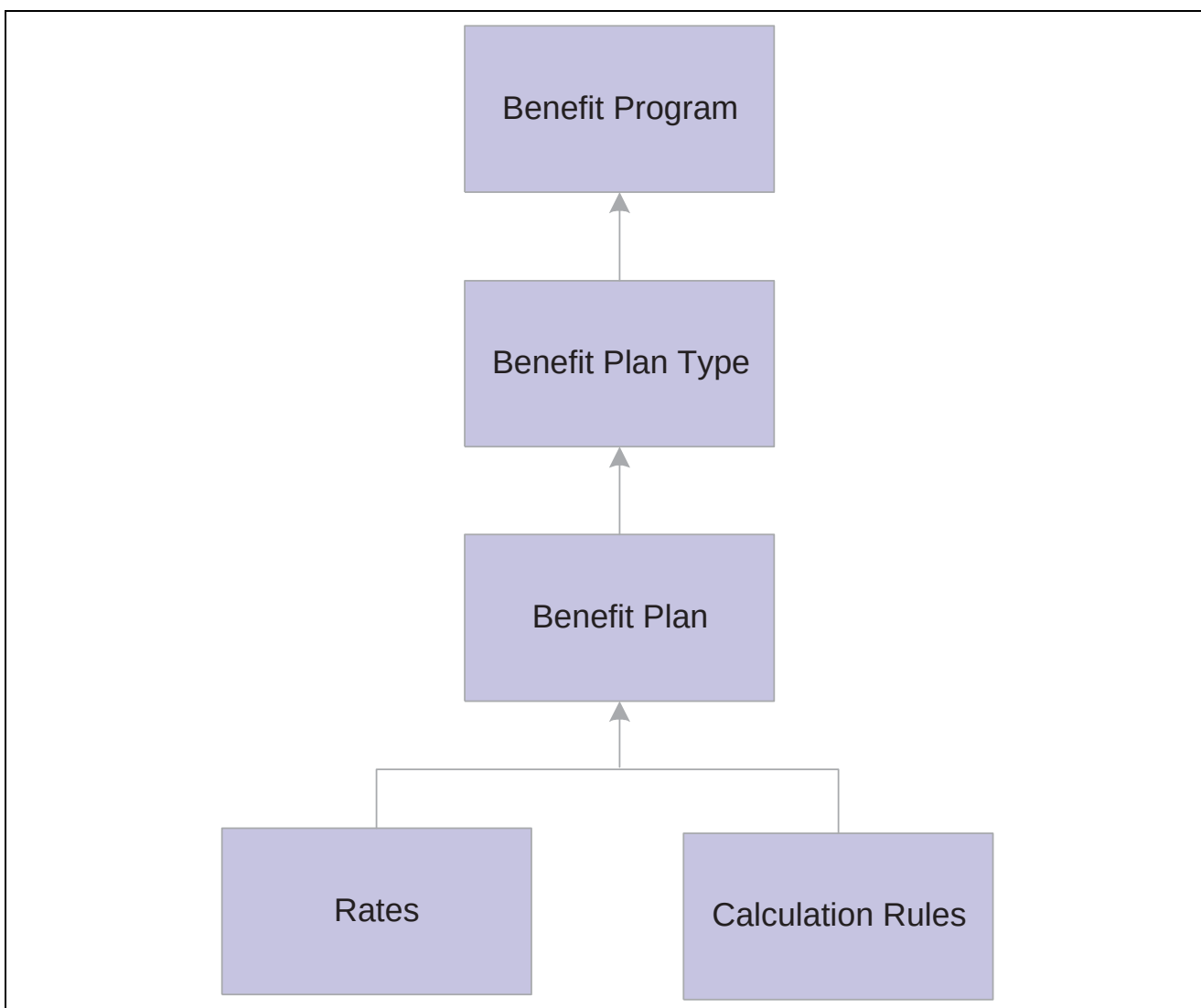
The core of Human Resources Base Benefits comprises four main phases of operation:

1. Set up various supporting tables and benefit plans.
2. Build your benefit programs.
3. Assign employees to benefit programs and enroll them in plans for which their program enrollment makes them eligible.

Note. For Federal users, employees are assigned to benefit programs through the Human Resources PAR process.

4. Calculate rates and benefit deductions. If you use PeopleSoft Payroll for North America, you calculate deductions through the payroll process. If you use another payroll system, you use PeopleSoft Payroll Interface to link the PeopleSoft benefits information to that system.

The following diagram illustrates the structure upon which benefit programs are built.



Building blocks for benefit programs

Setting Up Support Tables and Benefit Plans

When implementing Human Resources Base Benefits you will set up the following tables. These tables are the building blocks for your benefit programs.

Table	Definition
Vendor/Provider	Organization that provides or services a benefit offering.
Coverage Group Codes	Identifies the maximum lifetime coverage allowed in life and accidental death policies.
Service Step	Define a vesting schedule based on years of service for employer matching contributions to savings plans.
Rate Tables	There are four types of rate tables: Age, Salary, Service, and Flat. These tables are used to calculate the cost of a benefit.
Calculation Rules	Defines the rules for calculating benefit deductions, such as as-of dates for age, service, premium, and coverage calculations; rounding rules; and minimum/maximum coverage amounts.
Coverage Codes	Defines who can be covered by the benefit.
Limits	Defines the rules for employee contributions to savings plans that fall under US Federal regulations.
Deduction Code	Defines the rules for calculating the amount of the deduction and how payroll should process the deduction.
Benefit Plan Type	Any benefit category, such as health, life, or savings.
Benefit Plan	A benefit offering within a plan type. For example, a life plan type might include two benefit plans: one times salary and two times salary. To define a benefit plan, identify the benefit plan type and name the benefit plan. You can link a benefit plan to many benefit programs; you don't need to reenter the same benefit plan information, no matter how many benefit programs include the plan.
Benefit Program	A collection of benefit plans your company offers to a group of employees might be different for hourly, salaried, and executive employees. You can build as many programs as necessary to support your business rules and operational policies.

Building Benefit Programs

After you complete the blocks of information, you're ready to assemble your benefit programs with the Benefit Program Table, which enables you to:

- Associate appropriate benefit plans with a benefit program.
- Identify the rates and calculation rules you want the system to use for each benefit-program and benefit-plan combination.
- Assign any one benefit plan, such as a particular medical plan, to any number of benefit programs and identify unique rates and payroll processing rules for each such program/plan combination.

See Also

Chapter 5, "Building Base Benefit Programs," page 75

CHAPTER 3

Setting Up Core Human Resources Base Benefits Tables

This chapter provides an overview of the core Human Resources Base Benefits tables and explains how to:

- Set up provider table.
- Set up coverage codes.
- Set up coverage group codes.
- Set up FEGLI Codes.
- Set up service step table.
- Set up rates and premium amounts.
- Set up calculation rules.
- Set up deduction codes.
- Set up special accumulators.
- Set up limits for qualified savings plans.
- Set up earning for leave and vacation buy/sell plans.

Understanding the Core Human Resources Base Benefits Tables

Before you can begin building your benefit programs and entering your benefit plan information, there are some core tables that must be set up first. This chapter covers setting up those core tables.

Setting Up the Provider Table

A benefit provider is a vendor. A benefit provider is the entity that sponsors the benefit plan that your company offers your employees. For example, if your company offers a Blue Cross/Blue Shield health insurance plan, Blue Cross/Blue Shield is the provider. If your organization has a self-funded medical plan but uses a third-party administrator (TPA) to handle administrative functions such as eligibility and claims, the TPA can be considered a vendor.

You use the Provider/Vendor Table to set up an ID for each vendor. To enter the vendor information, you need to know:

- The vendor's bank account and how the vendor wants to receive payments.
- Your organization's bank account that holds the funds sent to the vendor.

Warning! If your organization uses PeopleSoft North American Payroll and PeopleSoft Payables to pay a benefit vendor, add the vendor using the Payables Vendor Table, not the Base Benefits Vendor Table.

See Also

PeopleSoft 8.8 Application Fundamentals for HRMS PeopleBook, "Setting Up Vendors"

PeopleSoft Payables PeopleBook

Setting Up Coverage Codes

You define and manage coverage codes for your benefit programs with the Coverage Code Table. You will attach these coverage codes to your benefit plan options on the Benefit Program Table.

PeopleSoft delivers seven basic coverage codes, described in the table below.

Coverage Code	1	2	3	4	5	6	7
Description	Employee Only (USF) Self Only – Low	Employee + Spouse (USF) Self + Family – Low	Employee + Dependents	Family (USF) Self Only – High	Non-qualified Adult (USF) Self + Family – High	Non-qualified Children	Non-qualified Adult + Children
Minimum Number of Dependents	0	1	1	2 (USF) 1	1	1	2
Maximum Number of Dependents	0	1 (USF) 99	99	99	1	99	99
Spouse Coverage	Not Allowed	Required	Not Allowed	Required	Not Allowed	Not Allowed	Not Allowed
Nonqualified Coverage	Not Allowed	Not Allowed (USF) Allowed	Not Allowed	Not Allowed	Required (USF) Allowed	Required	Required

Page Used to Set Up Coverage Codes

Page Name	Object Name	Navigation	Usage
Coverage Code Tbl (coverage code table)	COVRG_CD_TBL	Set Up HRMS, Product Related, Base Benefits, Plan Attributes, Health Coverage Codes	Define coverage codes.

Entering Coverage Code Information

Access the Coverage Code Tbl page.

Coverage Code Tbl page

Min No of Dependents Allowed (minimum number of dependents allowed) and **Max No of Dependents Allowed** (maximum number of dependents allowed)

If there is no limit, enter 99.

Spouse Coverage

The coverage codes PeopleSoft delivers enable you to specify whether not to allow the participant to have a spouse or require the participant to have a spouse.

Note. You would only use *Allowed* when you do not want the coverage code to require that one of the dependents must be a spouse.

Non Qualified Dep Coverage (nonqualified dependent coverage)

This governs whether or not domestic partners, their children, and other dependents deemed “nonqualified” by IRS Section 152 are not allowed or required by this coverage code.

PeopleSoft delivers three coverage codes for nonqualified dependents. All of them require nonqualified dependent coverage but do not allow spouse coverage.

COBRA Coverage Set

This is a two character code that is used to group coverage codes together for COBRA eligibility purposes. When an individual experiences a COBRA event, the system must adjust the range of coverage codes available to each qualified beneficiary. By restricting itself to a specific set of coverage codes, COBRA processing is able to more accurately determine which benefit options to present to a participant who is eligible for COBRA coverage. If COBRA coverage sets are not established, then COBRA processing may encounter multiple equivalent coverage codes, and eligibility determination may fail.

Setting Up Coverage Group Codes

Life insurance and accidental death and dismemberment (AD/D) plans use coverage group codes to establish the maximum lifetime coverage allowed.

For example, let's say you define a Coverage Group Code with a \$500,000 maximum, then enter that Coverage Group Code for a supplemental life plan and a group life plan, and associate both benefit plans with a benefit program. If you were to enroll an employee in both of those plans, the system would ensure that the employee's total coverage by both plans does not exceed \$500,000.

What happens if the total coverage for a participant exceeds the Coverage Maximum? The system will reduce the total coverage to meet the Coverage Maximum. As the system processes the deduction, it accumulates the coverage amounts and will begin reducing coverage when the coverage group maximum is reached. The system processes plans in order of deduction priority, and if more than one plan has the same priority, it processes in increasing plan type order.

Note. Payroll uses the effective date to determine which coverage maximum to use for a particular processing cycle, according to the pay period end date.

Page Used to Set Up Coverage Group Codes

Page Name	Object Name	Navigation	Usage
Coverage Group Tbl (coverage group table)	COVERAGE_GROUP_TBL	Set Up HRMS, Product Related, Base Benefits, Plan Attributes, Life and AD/D Coverage Groups	Define a coverage group code that sets the maximum total life and AD/D coverage for a group of life and AD/D benefit plans.

Entering Coverage Group Code Information

Access the Coverage Group Tbl page.

Coverage Group Tbl page

Effective Date Payroll uses the effective date to determine which coverage maximum to use for a particular processing cycle, according to the pay period end date.

Coverage Maximum Applies to all the life and AD/D benefit plans that you associate with the coverage group code and that you associate with one benefit program.

You connect a life or AD/D plan with a coverage group code using the Life and AD/D Plan Table.

Setting Up FEGLI Codes

Define the FEGLI codes.

Pages Used to Set Up FEGLI Codes

Page Name	Object Name	Navigation	Usage
FEGLI Code Table	GVT_FEGLI_TBL	Set Up HRMS, Product Related, Base Benefits, Plan Attributes, FEGLI Code Table	Define FEGLI codes.

Entering FEGLI Code Information

Access the FEGLI Code Table page.

FEGLI Code Table

FEGLI Code: 90

***Effective Date:** 04/24/1999 **Status:** Active

Description: Basic + Option B (3%)

Short Description: Basic + Op

FEGLI Code Table page

Setting Up the Service Step Table

When you set up savings plans you can define your organization's employer match according to the employee's years of service. The Service Step Table defines the different intervals, tax classification, and the amount of match.

You can also define deduction classifications based on either a percentage of the employee's gross salary or a percentage of the employee's contribution amount.

Page Used to Set Up the Service Step Table

Page Name	Object Name	Navigation	Usage
Service Step Table	SERVICE_STEP_TABLE	Set Up HRMS, Product Related, Base Benefits, Rates and Rules, Service Step Table	Link the rate of employer matching contributions to an employee's length of service.

Entering Service Step Table Information

Access the Service Step Table page.

Service Step Table

Service Step Table ID: BSTP04

Service Step Table Find | View All First 1 of 1 Last

*Effective Date: 01/01/1980 BY + -

*Description: BSTP04 Short Description:

Service Find | View All First 1-2 of 2 Last

After Months of Service: 12 Match Rates Customize | Find | View All First 1-2 of 2 Last + -

*Deduction Class	Up to % of Employee Earnings	% of Employee Investment		
After-Tax	25.000	50.000	+	-
Before-Tax	25.000	50.000	+	-

After Months of Service: 36 Match Rates Customize | Find | View All First 1-2 of 2 Last + -

*Deduction Class	Up to % of Employee Earnings	% of Employee Investment		
After-Tax	25.000	100.000	+	-
Before-Tax	25.000	100.000	+	-

Service Step Table page

- After Months of Service** Enter the number of months the employee must be employed to receive the employer match.
- Deduction Class** Enter the tax classification for this match.
- Up to % of Employee's Earnings** Enter the maximum amount of the employer match contribution percentage.
- % of Employee Investment** Enter the percentage amount of the employee contribution that the employer will match.

Example of Before- and After-Tax Matching

Let's say you have a 401(k) plan that's set up to match:

- 50% on the first 3% of the employee's salary for before-tax contributions.
- 100% to 6% of the employee's salary for before-tax contributions.
- 25% on the first 2%, 50% to 4%, and 100% to 6% on the employee's after-tax contributions.

Here's how you set this up:

Deduction Class	Up to % of Employee Earnings	% of Employee Investment
Before	3	50
Before	6	100
After	2	25
After	4	50
After	6	100

Example of After Months of Service Rewards

This example shows how to use the After Months of Service field to create multiple service steps to reward employees for staying with the company.

After Months of Service	Deduction Class	Up to % of Employee Earnings	% of Employee Investment
0	Before	3	50
0	Before	6	100
0	After	2	25
0	After	4	50
0	After	6	100
24	Before	10	100
24	After	2	50
24	After	4	75
24	After	6	100

Setting Up Rates and Premium Limits

Your benefit system relies on rates to calculate the cost of benefits. You can create rate tables based on:

- Age
- Salary
- Service
- Flat amounts

In addition to these rates tables, you may want to limit the amount an employee pays towards the premium. On each rate table, you have the option of setting a limit on the employee portion of the premium.

Understanding Employee Premium Limits

You can define limits on the employee's portion of a benefit premium by specifying a percent of gross limit on the Calculation Rules Table.

For example, current legislation in Hawaii requires that employers charge no more than 1.5% of an employee's gross wages for medical coverage. Only the employee's personal coverage is subject to this limit.

If the rate table indicates the employer pays part of the premium, then any premium in excess of this final employee deduction amount (in this case, 1.5% of gross wages) is redirected (added) to the employer-paid portion of the premium. If the employer does not pay part of the premium, then no redirection takes place.

If the calculation rule associated with the benefit plan specifies a percent of gross limit, then the system calculates the premium as follows:

```
Lesser of:    [EE Premium Amount Subject to Limit or (Gross Pay * Limit%)],
plus         (Total EE Premium Amount - EE Premium Amount Subject to Limit)
```

Suppose that a monthly-paid employee is enrolled in family medical coverage, which has a flat rate of \$300/month. The amount of the employee's portion is \$125. The following code shows how to apply a 1.0% of gross pay limit to the employee-only coverage:

```
Total EE Premium Amount =    $300
EE Premium Amount Subject to Limit =    $125
Limit =    1.0% of Gross Pay
Gross Pay =    $10,000
```

The deduction is calculated as:

```
[Lesser of ($125 or ($10,000*.01))] + ($300 - $125)
= [Lesser of ($125 or $100)] + ($175)
= ($100) + ($175)
= $275
```

The amount of the employee premium in excess of the limited deduction is \$25 (\$300 - \$275). This excess amount is added to the employer-paid premium.

Here's another example. Instead of the employee's single-coverage portion of the premium being a flat amount of \$125, let's define this as 30% of the premium amount:

Total EE Premium Amount = \$300

EE Premium Amount Subject to Limit = 30%

Limit = 1.0% of Gross Pay

Gross Pay = \$10,000

The deduction is calculated as:

$$\begin{aligned} & [\text{Lesser of } (\$300 * 30\%) \text{ or } (\$10,000 * .01)] + (\$300 - \$125) \\ &= [\text{Lesser of } (\$90 \text{ or } \$100)] + (\$175) \\ &= (\$90) + (\$175) \\ &= \$265 \end{aligned}$$

In this case, \$35 (\$300 - \$265) is added to the employer-paid premium.

Warning! PeopleSoft delivers a set of rates with an ID of IRS. PeopleSoft Payroll for North America uses these IRS rates to calculate imputed income. The IRS table ID set should not be changed.

Common Elements Used by Rates and Premium Limits

Premium Pay Frequency	Define how you quote the cost of benefit rates. If the employee's pay frequency differs from the premium frequency, the system annualizes the coverage rates and divides by employee pay frequency to determine the pay period rate.
Rate per Unit	• For a flat rate, select <i>None</i>. • For a rate that applies to each \$100 of coverage, select <i>Per Hundred</i>. • For a rate that applies to each \$1,000 of coverage, select <i>Per Thousand</i>.
Specify Limit	Click to display the Amount To Limit page and set employee premium limits.

Pages Used to Define Rates and Premium Limits

Page Name	Object Name	Navigation	Usage
Age-Graded Rate	AGE_RATE_TABLE	Set Up HRMS, Product Related, Base Benefits, Rates and Rules, Age-Graded Rate Table	Create rates based on age, sex, and smoking habits.
Salary Rate Table	BAS_SALARY_RATE	Set Up HRMS, Product Related, Base Benefits, Rates and Rules, Salary Rate Table	Define rates based on a percentage of salary.
Service Rate Table	SERVICE_RATE_TABLE	Set Up HRMS, Product Related, Base Benefits, Rates and Rules, Service Rate Table	Add rates that are based on length of service.
Flat Rate Table	BAS_FLAT_RATE_TBL	Set Up HRMS, Product Related, Base Benefits, Rates and Rules, Flat Rate Table	Create rates that are based on a specific dollar amount.
Age Graded Rate: Amount to Limit	AGE_RATE_LMT	Click Specify Limit from the Age-Graded Rate Table page.	Define the portion of the employee rate that is subject to the percent of gross pay limit defined on the Calculation Rule page.
Salary Rate: Amount to Limit	BAS_SAL_RATE_LMT	Click Specify Limit from the Salary Rate Table page.	Set limits for base salary rates.
Service Rate: Amount to Limit	SERVICE_RATE_LMT	Click Specify Limit from the Service Rate Table page.	Set limits for length of service rates.
Flat Rate: Amount to Limit	BAS_FLAT_RATE_LMT	Click Specify Limit from the Flat Rate Table page.	Set limits for flat-amount rates.

Defining Age-Graded Rates

Access the Age-Graded Rate page.

Age-Graded Rate

Age-Graded Rate Table ID: B101

Age Graded Rate Table Find | View All First 1 of 1 Last

***Effective Date:** 01/01/1900

***Description:** B101

Short Description:

***Premium Pay Frequency:** M Monthly

***Rate per Unit:** None

[Specify Limit](#)

Coverage/Price Customize | Find | View All First 1-2 of 2 Last

General Employer Portion Employee Portion

*Gender	Age Range Low	Age Range High	Total Rate - Smoker	Total Rate - Nonsmoker		
Female	1		50.000		+	-
Male	1		50.000		+	-

Age-Graded Rate page

Coverage/Price

Define rates for a specified gender, age range, and smoking habit.

The system calculates the employee portion of the premium based on the total rate and employer portion.

Note. We deliver a set of rates with an ID of IRS. PeopleSoft Payroll for North America uses these IRS rates to calculate imputed income. *This table should not be changed.*

Defining Salary Rates

Access the Salary Rate Table page.

Salary Rate Table

Percent of Salary ID: B412

Salary Rate Table Find | View All First 1 of 1 Last

***Effective Date:** 01/01/1998

***Description:** B412

Short Description:

***Percent of Salary:** 1.000

[Specify Limit](#)

Employer Portion: 0.000

Employee Portion: 1.000

Salary Rate Table page

Employee Portion Automatically calculated based on the total rate and employer portion.

Defining Service Rates

Access the Service Rate Table page.

Service Rate Table

Service Rate Table ID: B201

Service Rate Table

Find | View All First 1 of 1 Last

*Effective Date: 01/01/1980

*Description: B201

*Premium Frequency: M Monthly

*Rate per Unit: Per Hundrd

Short Description:

Specify Limit

After Months of Service	Total Rate	Employer Portion	Employee Portion		
0	1.500	0.000	1.500	+	-
36	1.500	0.750	0.750	+	-
60	1.500	1.000	0.500	+	-

Service Rate Table page

Employee Portion Automatically calculated based on the total rate and employer portion.

Defining Flat Rate Tables

Access the Flat Rate Table page.

Flat Rate Table

Flat Rate Table ID: B303

Flat Rate Table

Find | View All First 1 of 1 Last

*Effective Date: 01/01/1980

*Description: B303

*Premium Pay Frequency: M Monthly

*Rate per Unit: None

Short Description:

Specify Limit

Coverage Rates	
Total:	220.0000
Employer:	110.0000
Employee:	110.0000
Provider:	220.0000

Flat Rate Table page

Total	Include any administrative fee that you may charge.
Employee	Automatically calculated from the total and employer amounts.
Provider	The system automatically assigns the Total amount to the provider. If you include an administrative fee in the total, override the provider amount with what you actually pay the provider. The Provider amount is only informational; you can use it for reports of provider payments.

Defining Employee Premium Limits

Access the Amount to Limit page.

Rate Limit Code	Defines the portion of the employee rate that is subject to the percent of gross pay limit defined on the Calculation Rule page. You can select: <i>All:</i> The entire employee rate is subject to the limit. <i>Flat Amount:</i> Enter the amount that is subject to the limit. <i>Not Applicable:</i> Select this option and the entire employee rate is subject to the limit. <i>Percent of Rate:</i> Enter the percentage amount of the employee rate that is subject to the limit. This percentage amount cannot be greater than 100.

Setting Up Calculation Rules

You use calculation rules to define how deductions are calculated for each benefit plan. Calculation rules apply to the premium and the amount of coverage. When determining calculation rules, you need to understand:

- Compensation base and annual benefits base rate.
- (USF) Compensation base.
- Salary as-of dates.
- Employee compensation base.
- Age or service as-of dates.
- Coverage minimums and maximums.
- Calculation options.
- Rounding options.

Compensation Base Versus Annual Benefits Base Rate

Some benefits, such as life and disability insurance, can be based upon the employee's actual compensation rate or an arbitrary annual benefits base rate (ABBR) that you define for the employee.

Calculation rules use an employee's earnings as part of the definitions. If you are going to base the employee's earnings on an amount other than the employee's regular compensation rate, you need to enter an amount in the Annual Benefit Base Rate field on the Compensation page of the Job Data component.

See *PeopleSoft 8.8 Human Resources PeopleBook: Administer Workforce*, "Hiring Your Workforce".

Note. If a calculation rule specifies that the ABBR should be used, but the employee has not been assigned an ABBR, the system will use the employee's regular compensation rate instead.

(USF) Compensation Base

The compensation base is set through the Personnel Action Request (PAR) process. You can:

- Use the adjusted regular compensation amount provided in the Expected Pay page accessed from the Compensation Data page of the PAR component. The regular compensation amount will be the Base Pay for the employee's compensation frequency *With Locality/LEO Adjustment*.
- Override the FEGLI Base rate.

The system uses the regular adjusted compensation amount for benefit processing. The exception to this rule is FEGLI plans: you can have the system use a different base rate when processing FEGLI plans by overriding the FEGLI Base. The FEGLI Base mirrors the quoted Total Pay until it is overridden.

See *PeopleSoft 8.8 Human Resources PeopleBook: Administer Workforce*, "(USF) Hiring Employees".

Salary As-Of Dates

If the premium or coverage is based on employee salary, you can specify the salary *as of*:

- A specific day and month for the current year.
- A specific day and month for the previous year.
- The current pay period.
- The next pay period.

When Multiple Jobs is activated, you must also tell the system which jobs to use when calculating the employee's earnings.

The calculation possibilities with as-of rates are:

Premium	Coverage	Calculation
Current	Current	As now
As/of	Current	See Example #1
As/of	As/of	See Example #2
Current	As/of	Invalid

Example #1: Employer Pays Increased Premium

An employee belongs to a life insurance plan that uses the premium as of January 1, current year and coverage as of the current date. The system uses the benefit base for the calculation.

Employee	Effective Date	Salary	Benefit Base
Ann Jeffrey	01/01/91	10,000	12,000
	04/01/91	15,000	15,000
	01/01/92	17,500	18,000

Table	Effective Date	Rate	Per
Life (employee)	01/01/91	1.00	Thousand
Life (employer)	01/01/91	2.00	Thousand

The employee gets a raise, so coverage increases during the year; however, until the next January 1, the system calculates the employee premium as if the coverage did not increase. The employer pays the difference between the employee deduction and the actual cost. This affects imputed income.

Pay End Date	Coverage	Employee Amount	Employer Amount
01/31/91	12,000	12.00	24.00
02/28/91	12,000	12.00	24.00
03/31/91	12,000	12.00	33.00
04/30/91	15,000	12.00	33.00
05/31/91	15,000	12.00	33.00

Example #2: Coverage and Premium Remain the Same

Another employee belongs to a life insurance plan that uses the premium as of January 1, current year and coverage as of January 1, current year.

Employee	Effective Date	Salary	Benefit Base
Jim Henry	01/01/91	10,000	12,000
	04/01/91	15,000	15,000
	01/01/92	17,500	18,000

Table	Effective Date	Rate	Per
Life (employee)	01/01/91	1.00	Thousand
Life (employer)	01/01/91	2.00	Thousand

There is no change in Jim Henry's coverage or premium until the new year.

Pay End Date	Coverage	Employee Amount	Employer Amount
01/31/91	12,000	12.00	24.00
02/28/91	12,000	12.00	24.00
03/31/91	12,000	12.00	24.00
04/30/91	15,000	12.00	24.00
05/31/91	15,000	12.00	24.00

Page Used to Set Up Calculation Rules

Page Name	Object Name	Navigation	Usage
Calculation Rules	CALC_RULES_TABLE	Set Up HRMS, Product Related, Base Benefits, Rates and Rules, Calculation Rules Table	Use the Calculation Rules Table - Calculation Rules page to define the "as of" dates.

Defining Calculation Rules

Access the Calculation Rules page.

Calculation Rules	
Calculation Rules Table ID: B002	
Calculation Rules Table Find View All First 1 of 1 Last	
*Effective Date:	01/01/1980  + -
*Description:	B002 Short Description:
Salary As Of	
☐ Combine Salary for Multi Jobs ☐ Consider Active Jobs Only	
*Group Method:	Primary 
*Premium Calculation:	This Yr On  Month: 1 Day: 1
*Coverage Calculation:	This Yr On  Month: 1 Day: 1
Age/Service As Of	
*Age As Of:	This Yr On  Month: 1 Day: 1
*Service As Of:	This Yr On  Month: 1 Day: 1
*Age Source:	Employee 

Calculation Rules page (1 of 2)

Coverage Options Coverage Minimum: 100 Coverage Maximum: 500000 Maximum Benefit Base:	Calculation Options *Add Flat Amount Option:  After Fctr Max Deduction % of Gross Pay: *Benefits Base:  Annual Rt
Rounding Options ☒ Use Rounding Rules ☐ Round Benefits Base *Round Up On: 500.00 *Round to Multiple of: 1000 ☐ Round Factored Benefits Base Before Adding Flat Amount ☒ Round Final Calculated Covrg	

Calculation Rules page (2 of 2)

Effective Date

Must be the same as or prior to the effective dates of the one or more benefit program and benefit plan combinations that you associate the calculation rules with.

Combine Salary for Multi Jobs	Select to activate the grouping method for multiple jobs.
Consider Active Jobs Only	If you selected Combine Salary for Multi Jobs, select this option to have the system only look at jobs with a status of <i>Active</i> in the Job Data components.
Group Method	If you selected Combine Salary for Multi Jobs, select the grouping method to use when calculating premium and coverage amounts. Choose from: <i>All Flagged</i>: All flagged jobs, regardless of benefit record number, are included in the calculation. <i>Flagged BR</i>: All flagged jobs within the current benefit record number are included in the calculation. <i>Primary</i>: Only the primary job within the current benefit record number is included in the calculation.
Premium Calculation	Select the employee salary that will be used for the premium calculation. Choose from: <i>Cur/Chk Dt</i> (current/check date): Indicates that PeopleSoft Payroll uses the pay end date to calculate premiums. <i>Last Yr On</i> (last year on): Indicates a specific date last year. You must enter the month and day. <i>This Yr On</i> (this year on): Indicates a specific date this year. You must enter the month and day.
Coverage Calculation	Select the employee salary that will be used for the coverage calculation.
Age As Of	Used to calculate rates for life plans that you associate with age-graded rates. If you don't use the Age-Graded Rate Table, leave this field blank.
Service As Of	Used to calculate rates for plans that you base on years of service. If you don't use the Service Rate Table, leave this field blank.
Age Source	Designate whose personal information that you want to use. Choose from <i>Dependent</i>, <i>Employee</i>, or <i>Spouse</i>. The system only uses dependent age and demographic information for Dependent Life plans that are designated as Sum of Dependent Coverage. A Flat Amount or Factor Plus Base Dependent Life plan typically has a premium that is based not on the number or demographics of the dependents covered, but on the coverage amount. Flat Amount and Factor Plus Base Dependent Life plans should therefore only use employee or spouse demographics. If the system cannot locate a birth date for a dependent or spouse, it generates a warning that a birth date was not located and uses the employee's age instead, while still retaining the dependent's sex and smoker status.
Coverage Minimum	Enter the minimum amount of coverage an employee can receive for individual plans with this set of calculation rules. The system does not round over or under these amounts.

Coverage Maximum	Enter the maximum amount of coverage an employee can receive for individual plans with this set of calculation rules. The system does not round this amount. If you use the Coverage Group Table to define a coverage group maximum for one or more life and AD/D plans that you link with this set of calculation rules, the system may force a lower minimum for the employee than the one that you enter here. That's because the system calculates the coverage group maximum last. If you are using calculation rules for general credits and if you enter a coverage maximum, PeopleSoft Benefits Administration will limit employee salary to that coverage maximum before calculating credits. If you do not want to limit the salary, leave Coverage Maximum blank.
Maximum Benefit Base	Enter an amount to limit the portion of an employee's salary that is used to calculate the premium and coverage amounts. This field is no longer used for the 401(a)(17) limit, which is now defined on the Limit table.
Add Flat Amount Option	If you have set up a benefit plan where coverage is based upon a Factor x Benefit Base + Flat Amount, select how you want the flat amount applied. You can choose from: <i>After Fctr</i> (after factor): Arranges the equation as (Factor x Salary) + Flat Amount. <i>Before Fctr</i> (before factor): Arranges the equation as Factor x (Salary + Flat Amount).
Max Deduction % of Gross Pay (maximum deduction percentage of gross pay)	If you have employees in Hawaii, state laws mandate that employers charge no more than 1.5% of gross wages for employee-only coverage. Use this field to establish a calculation rule with Max Deduction % of Gross Pay set to a value of 1.5 or lower. This rule will be attached to the Cost row of the benefit plan coverage code associated with employee-only coverage. This deduction calculation is performed when: • The Pay Calculation process is being run. • The plan type is <i>Health</i>. • The coverage code is <i>Employee Only</i>. • The calc rule ID is defined. • The values for Max Percent of Gross Pay, Deductions, and Gross Pay are all greater than zero. The Max Deduction % of Gross Pay calculation looks like this: $\text{Deduction} = \text{Max Percent of Gross Pay} * \text{Federal Taxable Gross Pay} / 100.$ The smaller deduction appears on the paycheck. Benefits Base Designate the rate of pay used to make calculations. Select either:

Annual Rate to use the regular compensation base entered on the Job Data - Compensation page.

ABBR to use the amount entered in the annual benefits base rate entered on the Job Data - Compensation page.

Note. For federal users, ABBR corresponds to the Total Pay field on the Expected Pay page of the PAR Compensation Data component.

Round Up On

Enter the amount to round up on.

Round to Multiple of

Enter the multiple that you want to round to.

For example, if the benefits base rate for an employee is \$46,746 and you enter \$1,000 in Round to Multiple of and \$500 in Round Up On, the system calculates and rounds coverage for the employee as follows:

$46746/1000 = 46$, with a remainder of 746

746 is greater than 500, so $46 + 1 = 47$

$47 \times 1000 = 47,000$ Coverage Amount

Round Benefits Base

Rounds the benefit base according to the rules set up in the Round Up On and Round to Multiple of fields before performing any other calculation.

Use this option when pay is equal to the benefits base with no flat amount added.

Round Factored Benefits Base Before Adding Flat Amount

Rounds the factored benefits base according to the rules set up in the Round Up On and Round to Multiple of fields before adding a flat amount.

Displayed only if you select *After Fctr* in the Add Flat Amount Option field.

Round Final Calculated Covrg (round final calculated coverage)

Select to round the final coverage amount according to the rules set up in the Round Up On and Round to Multiple of fields.

Setting Up Deduction Codes

PeopleSoft Human Resources Base Benefits is designed to work with Payroll for North America and Payroll Interface. Calculating deductions accurately is an important payroll function.

There are two types of deductions: benefit-related and general. An example of a benefit-related deduction is medical insurance—an employee pays an amount, usually each pay period, toward the cost of medical insurance. An example of a general deduction is union dues.

Deduction information includes a Deduction Code and your business rules for how to process the deduction—the priority of the deduction, how it affects taxes, related general ledger account codes, and other special payroll process indicators, such as how you handle arrears.

Benefit deduction rules work in conjunction with the rules you define for each of your benefit plans. To calculate a benefit deduction, payroll uses both the benefit deduction rules and benefit plan rules. After you set up your rules and enroll employees, payroll will process deductions during each pay cycle.

Note. Even if you haven't purchased either of these products, the system still requires you to create a dummy deduction code.

Designing a Deduction Strategy

When setting up deduction you need to make some basic decisions about your strategy before you set up deduction rules, and these decisions depend in part upon how you want to report deductions to employees.

Here's a quick reference that shows the basic benefit deduction pay stub reporting options and how to make them happen:

You Want To Report	Do This	Result on Pay Stubs
The amount for each benefit plan.	Define a deduction code for each benefit plan.	Itemized descriptions and deduction amounts appear for each chosen plan type.
One total for a plan type.	Define a deduction code for a specific plan type.	
One total for all deductions.	Modify your pay check print program to print the total deduction for several plan type series. For example, you might print the total deductions for all health and life plan type series, while still showing a separate deduction for a savings plan, like 401(k). You must modify your system because you can't automatically "roll up" to a higher level than plan type.	The total deduction of all plan types you modify appears.

Page Used to Set Up Deduction Codes

Page Name	Object Name	Navigation	Usage
Deduction Table - Setup	DEDUCTION_TABLE1	Set Up HRMS, Product Related, Benefits NLD, Deduction Table	Define the name of the deduction, priority of the deduction, and the maximum arrears amounts.

Creating Deduction Codes

Access the Deduction Table page.

Deduction Table	
Plan Type: 00 General Deduction	Deduction Code: B00-01
Deduction Details Find View All First 1 of 1 Last	
*Effective Date:	01/01/1980
*Description:	AD/D Taxable Benefit
Short Description:	AD/D Tax
Permanent/Incidental ☐ Incidental ☐ Permanent ☒ Both	Tax Class ☒ WT, SS ☐ WT, NoSS ☐ NoWT, SS ☐ NoWT, NoSS

Deduction Table page

To create a deduction code you must enter the effective date and the long description. If you are using Payroll for North America or Payroll Interface, refer to those manuals for information on completing the rest of the pages.

See Also

PeopleSoft 8.8 Payroll for North America PeopleBook

PeopleSoft 8.8 Payroll Interface PeopleBook

Setting Up Special Accumulators

Sometimes it is necessary to define an employee's earnings based on specific types of earnings rather than total gross earnings. Special accumulators act like a bucket accumulating only the earning types you want included when determining the employee's earnings.

Special accumulators are used during deduction calculations and limit testing. You might have a benefit deduction that you base on an earnings amount other than total gross.

For example, you might use a special accumulator to identify all the separate earnings to include when accumulating employee earnings for 401(k) deductions.

Typically, you want to define a special accumulator for qualified savings plans, such as 401(k) that are subject to limit testing.

You first name the special accumulator using the Special Accumulator Table. The next step is to tie specific earnings types to that special accumulator.

Pages Used to Set Up Special Accumulators

Page Name	Object Name	Navigation	Usage
Special Accumulator Table	SPCL_EARNS_TABLE	Set Up HRMS, Product Related, North American Payroll, Compensation and Earnings, Special Accumulator Table	Define special accumulator codes.

Entering Special Accumulators

Access the Special Accumulator Table page.

Special Accumulator Table

Special Accumulator Code: 401

Special Accumulator(s)		Find View All	First 1 of 1 Last
*Effective Date:	01/01/1980	*Status:	Active
*Description:	401K Eligible Earnings		
Short Description:	401K Earns		

Special Accumulator Table page

Setting Up Limits for Qualified Savings Plans

Certain qualified benefit savings plans may be subject to government regulations.

This section provides overviews of limits and discusses how to:

- Set up 401(a) limits.
- Set up 402(g) limits.
- Set up 403(b) limits.
- Set up 457 limits.

Understanding Limits

Limits are tied to deduction codes. When your payroll department runs the pay calculation process, the system checks to see whether a deduction has any limits associated with it. If it does, the system runs the testing calculations and makes the limit adjustments to every affected employee's records. If a deduction cannot be taken, it is reported with the appropriate Reason-Not-Taken Code.

Understanding 401 Limit

The 401 limit is designed to eliminate the tax advantage highly compensated employees have by participating in qualified plans. This limit sets up a maximum cap on the employee's annual earnings during the calculation of the employee's contribution. When calculating the employee annual earnings, the 401 limit is applied against the Special Accumulator field defined on the Savings Plan tables, not on the Special Accumulator field on the Limit Table.

Understanding 402 Limit

The 402 limit imposes a flat dollar annual limit on the amount an employee can contribute as an elective deferral.

Understanding 403 Limit

The 403 limit defines the parameters that extend the maximum amount of the elective deferrals that an employee (with 15 or more years of service) in a qualifying organization can contribute to the 403(b) savings plans. In addition to the 403 limit, 403(b) savings plans are also subject to 401, 402, and 415 limits.

To calculate this amount:

1. Multiply the employee's eligible earnings by 20%.
2. Multiply the figure by the employee's total years of service.
3. Subtract the prior year's pretax contributions.

Understanding 415 Limit

The 415 limit restricts the total amount an employee can contribute to defined savings plans. 401(k) plans are the most common type of defined savings plans to fall under Section 415, but other types include profit-sharing, money purchase pensions, stock bonuses, thrift savings, and target benefit plans.

Employee year-to-date contributions cannot exceed either:

- A specific percentage amount of the employee's eligible earnings.
- A specific flat annual amount.

If, for a given payroll, the employee's contribution exceeds the limits, the contribution must be reduced to fall within the limits.

Understanding 415Z Limit

This is identical to the 415 limit with the exception that it applies to 403(b) plans only.

Understanding 457 Limit

Section 457 plans are deferred compensation plans offered by state and local governments and employers that are exempt from federal income tax. The amount deferred annually by an employee cannot exceed a specific flat amount or 100% of the employee's taxable income, whichever is less.

Note. Section 457 plans are not qualified plans and are not subject to the tax code's nondiscrimination and related requirements. However, they are subject to deferral limits and mandatory distribution rules that apply to qualified plans.

Limit Extensions

Employees, who meet specific eligibility criteria and elect the applicable option, can increase their elective deferrals in savings plans subject to certain limits. The increase is handled with limit extensions, where, in general, the sum of the limit table amount and the extension amount are used instead of the limit table amount. Limit extensions are stored on the Savings Management (SAVINGS_MGT_EE) record.

The limit extensions are:

- 402 - Catch Up, for employees with 15 or more years of service in a 403(b) plan.
- 457 - Catch Up, for employees within three years of retirement in a 457 plan.
- 402 - Age 50, for employees age 50 or more in a 401(k) and/or a 403(b) plan.
- 457 - Age 50, for employees age 50 or more in a 457 eligible governmental plan.

See Also

Chapter 11, "Monitoring Savings Plans," page 167

Common Elements Used to Define Limits

Rollover Allowed	Select if you want any contribution amount that exceeds the limit to roll over to another plan type or tax class. The actual destination of the excess funds is defined on the Savings Plan Table.
Maximum Benefit Base	The amount you enter in this field is determined by IRS regulations. It determines the maximum cap on the employee's annual earnings during the calculation of the employee's contribution.
Maximum Yearly Deduction	Enter the flat cap on yearly contributions.
Special Accumulator	Used to determine which year-to-date and current employee earnings are eligible for limit testing.
Max Percent of Accumulator (maximum percentage of accumulator)	Enter the percentage amount to use when calculating the maximum amount the employee can contribute.
Deductions Subject to Limit	Select the deduction codes for any and all benefit plans that fall under the specified limit. This list should be as comprehensive as possible. Both general deductions and benefit plans may be specified. To associate a limit to a deduction enter the plan type, benefit plan, general deduction code, and deduction class.

A single plan type may require more than one deduction classification. You may have to insert rows for after-tax, before-tax, nontaxable benefit, and nontaxable pre-tax benefit classifications for a single 401(k) plan.

Deductions Which Add to Spcl Accum (deductions which add to the special accumulator)

Enter deductions to add to the special accumulator. These are the taxable benefits that the IRS stipulates may be included in the calculation of the limits.

The system increases the employee's eligible earnings by the total year-to-date plus the current amount of the taxable benefits you enter here before calculating the employee's current limit.

To add a deduction to a special accumulator, enter the plan type, benefit plan, general deduction code, and deduction class.

Deductions Which Subtract From Spcl Accum (deductions which subtract from the special accumulator)

Enter the deductions that subtract from the special accumulator. These are deductions that the IRS stipulates must be excluded from the calculation of the limits. (Ordinarily, these are before-tax deductions, but you may encounter exceptions.)

The system reduces the employee's eligible earnings by the total year-to-date plus current amount of the deductions you enter here before calculating the employee's current limit.

For each taxable benefit, fill in the plan type, benefit plan, deduction code, and deduction class.

Page Used to Define Limits

Page Name	Object Name	Navigation	Usage
Limit Table	LIMIT_TBL1	Set Up HRMS, Product Related, Base Benefits, Rates and Rules, Limit Table	Identify the rules that apply to the 401, 402, 403, 415, and 457 limits.

Setting Up 401(a) Limits

Access the Limit Table page for 401(a) limits.

Limit Table

Limit Type: 401(a) Limit

Employee Earnings Limits Find | View All First 1 of 1 Last

***Effective Date:** 01/01/2002  **Rollover Allowed** ☒  

***Description:** 401 **Short Description:** 401

Maximum Benefit Base: \$200,000.00

▼ Deductions Subject To Limit Customize | Find  First 1-133 of 133 Last

*Plan Type	Benefit Plan	General Deduction Code	*Ded Class		
401(k)	BNFTE	401K Savin	After-Tax		
401(k)	BNFTE	401K Savin	Before-Tax		
401(k)	BNFTE	401K Savin	Nontaxable		
401(k)	BNFTE	401K Savin	PTax Ben		
401(k)	BP0129	T401M1	After-Tax		
401(k)	BP0129	T401M1	Before-Tax		

(401) Limit Table page

Setting Up 402(g) Limits

Access the Limit Table page for 402(g) limits.

Limit Table

Limit Type: 402(g) Limit

Employee Earnings Limits Find | View All First 1 of 1 Last

***Effective Date:** 01/01/2002  **Rollover Allowed** ☒  

***Description:** 402 **Short Description:** 402

Maximum Yearly Deduction: 600.00

▼ Deductions Subject To Limit Customize | Find  First 1-34 of 34 Last

*Plan Type	Benefit Plan	General Deduction Code	*Ded Class		
401(k)	BNFTE	401K Savin	Before-Tax		
401(k)	BP0270	401k EE	Before-Tax		
401(k)	BP0271	401k EE	Before-Tax		
401(k)	BP0272	401k EE	Before-Tax		
401(k)	BP0273	401k HCE	Before-Tax		
401(k)	BP0274	401k ER fl	Before-Tax		

(402) Limit Table page

Setting Up 403(b) Limits

Access the Limit Table page for 403(b) limits.

Limit Table

Limit Type: 403(b) Limit

Employee Earnings Limits

Find | View All First 1 of 1 Last

*Effective Date: 01/01/2002
Rollover Allowed ☐

*Description: 403
Short Description: 403

Special Accumulator: 401
Max Percent of Accumulator: 100.000

403b Limits

*403(b) Service Prorated By: FTE

402(g) Limits and Cap Expansions

*Elect 402(g) Cap Expansion: Automatic Election

402(g) Per Year Max Average: 5000.00

402(g) Annual Cap Expansion: 500.00
402(g) Lifetime Cap Expansion: 15000.00

Deductions Subject To Limit

Deductions Which Add to Spcl Accum

Deductions Which Subtract From Spcl Accum

Customize | Find | First 1-14 of 14 Last

*Plan Type	Benefit Plan	General Deduction Code	*Deduction Classification
Medical	KUHM01 HMO Plan 1		Before-Tax
Medical	KUHM02 HMO Plan 2		Before-Tax
Medical	KUHM03 HMO Plan 3		Before-Tax
Medical	KUMED Enhanced		Before-Tax

(403) Limit Table page

403(b) Service Prorated By Select the proration method to use for the 403(b) Service Year calculation in the Projection process. This information is pulled from the employee's Job record.

Alternative Limits Parameters and 402(g) Limits and Cap Expansions All of these fields are determined by IRS regulations. Enter the current approved standards.

Setting Up 457 Limits

Access the Limit Table page for 457 limits.

Limit Table

Limit Type: 457 Limit

Employee Earnings Limits Find | View All First 1 of 1 Last

***Effective Date:** 01/01/2001  **Rollover Allowed** ☒  

***Description:** Section 457 Savings Plan Limit **Short Description:** Sec 457

Special Accumulator: 401  **Max Percent of Accumulator:** 100.000

Maximum Yearly Deduction: 600.00

457 Plans

Max Annual 457 Catch Up: 1200.00

Deductions Subject To Limit

Deductions Which Add to Spcl Accum

Deductions Which Subtract From Spcl Accum Customize | Find  First 1-11 of 11 Last

*Plan Type	Benefit Plan		General Deduction Code		*Deduction Classification		
Medical	KUMED	Enhanced			Before-Tax		 
Medical	KUMED1	In-Network			Before-Tax		 
Medical	KUMED2	Non-Netwk			Before-Tax		 

(457) Limit Table page

Max Annual 457 Catch Up (maximum annual 457 catch up)

Section 457 plans have a catch-up rule. Within three years of retirement, a participant may increase the amount contributed to the savings plan. This field is determined by IRS regulations.

Setting Up Leave and Vacation Buy/Sell Earnings

Earnings types are the various ways in which an employee might receive income. The benefit-related earnings that most concern earnings types are leave plans and vacation buy/sell plans.

To have the system process these earnings during the payroll process, you'll use the Earnings Table to create these codes. The Earnings Table stores the business rules that define how to calculate employee earnings.

Setting Up Payroll Information for Leave Accruals

This section assumes that your payroll department utilizes PeopleSoft Payroll for North America. If your organization uses another payroll accounting system, you'll need to ensure that the proper information is provided to the system for the correct processing of leave accruals. Follow these basic steps, making appropriate choices from your options.

1. On the Earnings Table - Special Process page enter the leave plan type for the leave plan you're defining in the Leave Plan Accrual group box.

2. Select the appropriate Add To Accrual Balance check box.

Add To Accrual Balance is important during the PeopleSoft Payroll Confirm process. It enables you to indicate where the accrued hours will be posted as Unprocessed Data on the employee's Leave Accruals pages.

You can choose to add hours to the Taken, Service Hours, Adjusted, Bought, and Sold accumulators.

The Leave Accrual process retrieves data from these sections to calculate the leave accrual award and the resulting leave accrual balance.

3. Select Taken when you want these hours to reduce the accrual balance (as in taken vacation hours or sick hours—but not regular hours).

Select Service Hours when the associated Leave Plans accrue a leave balance based upon the number of hours worked, and the hours for this earnings code should be considered in the accrual calculation.

4. Select Adjusted to define a special Earnings Type that adjusts accrual balances by adding to or subtracting from employee accrual balances. Select Bought or Sold only when you are using this earning as the Vacation Buy or Vacation Sell earning.

See Also

Chapter 13, “Managing Leave Plans,” page 189

Setting Up Vacation Buy and Sell Earnings

Organizations typically allow employees to buy or sell vacation once, at the beginning of a plan year, based on vacation buy and sell earnings, deduction, and benefit plan rules.

To set up vacation buy/sell earnings:

1. Navigate to the Earnings Table - Special Process page.
2. For Vacation Buy plans, select *Bought* in the Add to Accrual Balance group box .
3. For Vacation Sell plans, select *Sold* in the Add to Accrual Balance group box .

See Also

Chapter 14, “Managing Vacation Buy/Sell Plans,” page 195

CHAPTER 4

Setting Up Benefit Plans

This chapter provides an overview of benefit plans and explains how to:

- Define benefit plans.
- Set up health plans.
- Set up life insurance and accidental death plans.
- Set up disability plans.
- Set up savings plans.
- Set up leave plans.
- Set up FMLA plans.
- Set up FSA plans.
- Set up retirement plans.
- Set up U.S. pension plans.
- Set up vacation buy/sell plans.

Understanding Benefit Plans

Benefit plans are the benefits you want to offer to your employees. Benefit Plans can be broken down into categories. To identify the different categories, PeopleSoft uses a two digit alphanumeric numbering scheme. There are nine categories already set up in the Base Benefits system.

Category	Numbering Sequence
Health	10 – 19, 1A – 1Z
Life and Accidental Death	20 – 29, 2A – 2Z
Disability	30 – 39, 3A – 3Z
Savings	40 – 49, 4A – 4Z
Leave	50 – 59, 5A – 5Z

Category	Numbering Sequence
Flexible Spending Accounts	60 – 69, 6A – 6Z
Retirement	70 – 79, 7A – 7Z
Pension	80 – 89, 8A – 8Z
Vacation Buy/Sell	90 – 99, 9A – 9Z

Within each category, PeopleSoft offers a set of predefined Benefit Plan Types to help the system identify the type of benefit plan. The following table is a list of the delivered Benefit Plan Types.

Benefit Plan Type	Description
10	Medical (USF) FEHB
11	Dental
12	Medical and Dental
13	Major Medical
14	Vision
15	Nonqualified Medical
16	Nonqualified Dental
17	Nonqualified Vision
20	Basic Life (USF) FEGLI
21	Supplemental Life Additional (USF) Option B – Additional
22	AD/D

Benefit Plan Type	Description
23	Life and AD/D
24	Dependent AD/D
25	Dependent Life (USF) Option C – Family
26	Survivor Income
27	Supplemental AD/D
2Y	(USF) FEGLI Living Benefits
2Z	(USF) Option A – Standard
30	Short Term Disability
31	Long Term Disability
40	401(k)
41	Profit Sharing
42	Thrift
43	IRA
44	Capital Accumulation
45	US Savings Bonds
46	Elective 403(b)
47	Non-Elective 403(b)
48	Employer Only 403(b)
49	457(b)

Benefit Plan Type	Description
4A	Stock Purchase (Stock Purchase Administration Only)
50	Sick Leave
51	Vacation Leave Annual Leave
52	Personal Leave
53	FMLA Leave (Obsolete)
5A	Company Car (Global Users Only)
60	Flexible Spending Health Care
61	Flexible Spending Dependent Care
65	Flexible Spending Canadian Health Care
66	Flexible Spending Canadian Retirement Counseling
70	PERS Retirement
7Z	(USF) TSP 1% Agency Contribution
80	(CAN) Standard Pension
81	(CAN) Supplementary Pension
82	U.S. Pension Plan 1
83	U.S. Pension Plan 2
84	U.S. Pension Plan 3
85	U.S. Pension Plan 4

Benefit Plan Type	Description
86	U.S. Pension Plan 5
87	U.S. Pension Plan 6
90	Vacation Buy
91	Vacation Sell

You can add additional benefit plan types. However, it is important to understand the numbering scheme behind benefit plan types. The system is designed to recognize specific sequences.

For example, anything with a 1 as the first character is recognized as a health plan. Anything with a 2 as the first character is recognized as a life and accidental death plan.

Because PeopleSoft adds plan types starting from the beginning of the alphabet, we recommend that you start with Z and work backward to A. We also recommend that you do not delete a plan type, simply make it inactive.

Note. You should work within the PeopleSoft plan type series. If you add plan types that do not conform to the provided series, you'll have to add the new plan type to the Translate Table and update associated processing logic.

Defining Benefit Plans

To set up a benefit plan:

1. Identify the benefit provider for the benefit plan and enter the benefit provider in the Vendor Table page.
2. Enter the detail information for the benefit plan on the Benefit Plan Table.
3. Repeat this process for each benefit plan you will offer to your employees.

Page Used to Define Benefit Plans

Page Name	Object Name	Navigation	Usage
Benefit Plan Table	BENEFIT_PLAN_TABLE	Set Up HRMS, Product Related, Base Benefits, Plans and Providers, Benefit Plan Table	Use this page to define benefit plans.

Entering Benefit Plan Information

Access the Benefit Plan Table page.

Benefit Plan Table

Plan Type: 10 **Medical** **Benefit Plan:** BNFTE

Benefit Plans Find | View All First 1 of 1 Last

***Effective Date:** 01/01/1980  + -

***Description:** BNFTE **Short Description:** BNFTE

SetID: BNUSA  **Vendor ID:** BNFTE  BNFTE

Group Number:  **SPD URL ID:** 

Default Deduction Code: 

Pay Mode

Pay Mode: Pay as Deducted 

AP Payment Date Type: Check Date 

Self-Service Plan Description: 

Internal Administrative Contacts First 1 of 1 Last

	*Contact Type	*Contact ID	Contact Description
1			
- 			

Benefit Plan Table page

- SetID** Select a set ID for the vendor to be used.
- Vendor ID** If the provider is not on the list, use the Provider/Vendor Table to add it.
- Group Number** Defined on the Provider Policy Table.
- SPD URL ID** PeopleSoft eBenefits application to provide access to the summary plan description on the Provider Policy Table.
- Default Deduction Code** (Optional.) Entering a default code saves you from typing the deduction code each time that you associate this benefit plan with a benefit program on the Benefit/Deduction Program Table. (Deduction codes are created on the Deduction Code Table.)
- Minimum Spousal Allocation %** (minimum spousal allocation percentage) Certain qualified plans in the life, savings, or pension category have mandated lower limits on the percentage amount that must be assigned to a spouse. Enter that amount here and the system enforces or monitors compliance with this beneficiary right.
- Include in Nondiscrimination Testing** Available only to plan types in the 40-series (savings plans).
- Pay Mode** Complete if you are using PeopleSoft Payroll for North America with PeopleSoft Payables.

Select when the vendor will be paid:

Pay as Deducted: Pay the vendor each time payroll calculates this deduction.

Pay at Specified Date: Specify the date in the AP Payment Date Type field.

Pay when Collection Complete: Pay the vendor only when the goal amount or deduction end date has been reached. (This pay mode is valid for general deductions and garnishments.)

Separate AP Payment

Select to create a separate voucher for each deducted amount payable to the vendor.

Self-Service Plan Description

Used only for health (1x), disability (3x), leave (5x), and retirement (7x) plans. Enter text describing the benefit plan, to appear on PeopleSoft eBenefits application pages.

Setting Up Health Plans

This section describes how to:

- Enter health plan details.
- Set up health plans for domestic partners.

Page Used to Set Up Health Plans

Page Name	Object Name	Navigation	Usage
Health Plan Table	HEALTH_PLAN_TABLE	Set Up HRMS, Product Related, Base Benefits, Plan Attributes, Health Plan Table	Define basic attributes that control enrollment validation and processing.

Entering Health Plan Details

Access the Health Plan Table page.

The screenshot displays the 'Health Plan Table' page. At the top, there is a tab labeled 'Health Plan Table'. Below the tab, the following fields are visible:

- Plan Type:** 10 Medical
- Benefit Plan:** BNFTE BNFTE
- Health Plans:** A sub-section with a search bar (Find | View All) and navigation buttons (First, 1 of 1, Last). Below this are three input fields:
 - *Effective Date:** 11/15/2002 (with a calendar icon)
 - *Health Provider Required:** Not Required (with a dropdown arrow)
 - Wait Period Days:** 90

Health Plan Table page

Setting Up Health Plans for Domestic Partners

If you offer health coverage for domestic partners, their children, and other dependents defined as *nonqualified dependents* by IRS Section 152, you'll need to set up separate health plans and identify them as *nonqualified* health plans. Nonqualified plans should be identical as far as the benefits they offer and the provider they're linked with, although their deductions and costs will probably be different.

PeopleSoft delivers the following three nonqualified dependent plans:

Plan Type	Description
15	NQ Medical (Nonqualified Medical)
16	NQ Dental (Nonqualified Dental)
17	NQ Vision (Nonqualified Vision)

To cover nonqualified dependents, employees need to be enrolled in a regular health plan for themselves and any qualified dependents and in a corresponding nonqualified health plan for nonqualified dependents. So if an employee wants to enroll a domestic partner in health insurance, he or she needs to be enrolled in a plan type 10 medical plan for individual coverage and plan type 15 medical plan for the domestic partner.

There are also tax consequences for nonqualified dependent health benefits, as all employer-paid benefits for nonqualified dependent health plans are considered taxable income for the employee by the IRS under IRS Section 152.

Setting Up Life Insurance and Accidental Death Plans

This section describes how to:

- Enter life insurance and AD/D plan details.
- (USF) Understand Option A - standard FEGLI plan calculations.

Page Used to Set Up Life Insurance and AD&D Plans

Page Name	Object Name	Navigation	Usage
Life/Accidental	LIFE_ADD_TABLE	Set Up HRMS, Product Related, Base Benefits, Plan Attributes, Life and AD/D Plan Table	Calculate coverage for a life or AD/D plan.

Entering Life Insurance and AD&D Plan Details

Access the Life/Accidental page.

Life/Accidental

Plan Type: 20 Life

Benefit Plan: BP0004 Basic Life Plan

Life/ADD Plans Find | View All First 1 of 1 Last

***Effective Date:** 01/01/1980

***Coverage:** Flat Amount Only **Amount:** 50,000

Coverage Group Code: B001

Life/Accidental page

Coverage

Select the appropriate coverage.

Flat Amount Only: Calculates coverage according to a flat amount. The amount can be negative.

Note. (USF) Option A - Standard and Option C - Family FEGLI plans include a flat amount of \$10,000 and \$5,000, respectively.

Factor x Benefits Base + Flat Amount: Calculates coverage based on an employee benefits base and a factor, or a factored base and an amount. The amount can be negative.

Note. FEGLI basic life plans use a factor plus an amount.

Specified in Employee Record: Uses the amount of coverage that you specify when you enroll an employee.

Note. FEGLI living benefits plans use this level of coverage.

Special Calculation Routine: Uses a custom routine not supported by the standard system. You need to modify your SQR and COBOL programs accordingly.

Sum of Dependent Coverage: Uses the sum of the dependent coverage amounts that you enter when you enroll an employee.

Many dependent life plans use this type of coverage.

Coverage Group Code

(Optional.) Enables you to define a maximum benefit amount for a group of life and AD/D plan types. Coverage group codes are defined on the Coverage Group Table.

You might do this if employees can choose more than one life plan type—perhaps life and AD/D—but the total benefit for the *combined* plans cannot exceed a specific amount. The coverage group code maximum

applies to all the life and AD/D benefit plans that you associate with a coverage group code and one benefit program.

Setting Up Life Plans for Domestic Partners

Dependent life plans can be used to cover domestic partners, their children, and other dependents classified as nonqualified by IRS Section 152. No special plan types are required for nonqualified dependents.

The imputed income rules for domestic partners are different from those for qualified dependents. Imputed income is calculated for the full value of nonqualified dependent life coverage, whether or not it exceeds 2000 USD. (Qualified dependent coverage is exempt from imputed income calculation if it is under that amount.)

Calculating Insurance Coverage

When you associate calculation rules that include coverage minimum and maximum amounts with a life benefit program and benefit plan combination, the system verifies that coverage for participants doesn't exceed those minimums and maximums, regardless of the coverage that you enter on the Life and AD/D Plan Table.

For example, you define a coverage group code with a 500,000 USD maximum, then enter that coverage group code for a supplemental life plan and a group life plan, and associate both benefit plans with a benefit program. If you enrolled an employee in both of those plans, the system would ensure that the employee's total coverage by both plans does not exceed 500,000 USD.

If the maximum is exceeded, the system reduces the total coverage to meet the coverage maximum. As the system processes deductions, it accumulates the coverage amounts and begins reducing coverage when the coverage group maximum is reached. The system processes plans in order of deduction priority. If more than one plan has the same priority, it processes in increasing plan type order.

(USF) Understanding Option A - Standard FEGLI Plan Calculations

PeopleSoft Payroll for North America calculates coverage and premiums for the Option A - Standard FEGLI optional life plan in accordance with federal regulations. The Option A - Standard plan provides at least 10,000 USD in additional coverage, depending upon the employee's rate of pay.

When an employee's annual rate of pay is more than the sum of the annual rate of basic pay for Level II Executive Schedule positions under 5 U.S.C. 5313, plus 10,000 USD, Option A coverage automatically increases. The amount then becomes the difference between the employee's annual rate of pay and the maximum allowable Basic Insurance Amount (BIA). Calculations are included in the Calculation Rules Table for calculation rule ID *OPTA*.

The maximum allowable BIA appears in the Maximum Benefits Base field on the Calculation Rules Table page. PeopleSoft Payroll for North America uses this information to calculate coverage and premium amounts.

Setting Up Disability Plans

Insurance companies typically quote disability benefits on monthly terms (as opposed to life insurance benefits, which are quoted in annual terms).

Page Used to Set Up Disability Plans

Page Name	Object Name	Navigation	Usage
Disability Plan	DISABILITY_PLN_TBL	Set Up HRMS, Product Related, Base Benefits, Plan Attributes, Disability Plan Table	Define details for disability benefit plans.

Entering Disability Plan Details

Access the Disability Plan page.

Disability Plan

Plan Type: 30 Short-Term Disability
Benefit Plan: BP0068 Test Short Term Disability

Disability Plans Find | View All First 1 of 1 Last

*Effective Date: 01/01/1994
 *Maximum Monthly Benefit: 7,500.00
 *Salary Replacement %: 50.000 ☐ Use as Base for Premium Calc

Disability Plan page

Salary Replacement %
 (salary replacement percentage)

Enter the percent of employee salary this plan will replace, limited to the maximum monthly benefit.

(CAN) Use as Base for Premium Calc

For Canadian employers who can use employee covered salaries to calculate disability plan premiums. When selected, disability plan premium calculations are based on the employee's disability benefit salary replacement percentage, rather than the employee's covered salary. This amount is still limited to the specified maximum monthly benefit.

Calculation of Disability Plan Deductions

Disability plan deductions are calculated as follows:

Annualized Premium = (Calculated Base / Unit) * (Calculation Rate) * (Premium Frequency)

Disability Deduction = Annualized Premium / Payroll Frequency

The disability calculated base value is displayed on the Paycheck Deduction page.

Suppose that the rate specified on the Rate Schedule Table has a premium frequency of biweekly, and a .5 rate per hundred. For an employee with a disability calculated base of 1000 USD, the premium is annualized as follows:

$$(1,000 / 100) * .5 * 26 = 130 \text{ USD}$$

An employee paid semimonthly would have a deduction of $130/24 = 5.42 \text{ USD}$.

For an employee with a calculated base of 15,000 USD, and who is a salaried employee paid monthly, the deduction is calculated as follows:

$$[(15,000 / 100) * .5 * 26] / 12 = 162.50 \text{ USD.}$$

Setting Up Savings Plans

This section describes how to:

- Define employee investment limits.
- Define employer match or other contributions.
- Set up employee rollover options.

Pages Used to Set Up Savings Plans

Page Name	Object Name	Navigation	Usage
Employee Limit on Investments	SAVINGS_PLAN_TBL1	Set Up HRMS, Product Related, Base Benefits, Plan Attributes, Savings Plan Table	Enter a special accumulator and define limits on the amount an employee may put away each year, and that apply to highly compensated employees.
Employer Contribution/Match	SAVINGS_PLAN_TBL2	• Set Up HRMS, Product Related, Base Benefits, Plan Attributes, Savings Plan Table • Click the Employee Contributions/Match tab.	Define amounts an employer will contribute or match to a savings plan per pay period.
Rollover of Funds	SAVINGS_PLAN_TBL5	• Set Up HRMS, Product Related, Base Benefits, Plan Attributes, Savings Plan Table • Click the Rollover of Funds tab.	Define how employee rollovers from other savings plans are handled.

Defining Employee Investment Limits

Access the Employee Limit on Investments page.

Employee Limit on Investments		Employer Contribution/Match		Rollover of Funds	
Plan Type:	40 401(k)				
Benefit Plan:	BP0001 401(A) Savings				
Savings Plan Information Find View All First 1 of 1 Last					
*Effective Date:	01/01/1980	*Use Special Accumulator:	BH1		
		*Plan Contribution:	EE Contribution Required		
Limits on Employee Investments					
Up-To-Threshold Limit (Percent of Earnings)		Employee YTD Earning Threshold	Over-Threshold Limit (Percent of Earnings)		
Total Investment:	15.000	\$0.00	Total Investment:		
Before-Tax:	15.000		Before-Tax:		
After-Tax:	15.000		After-Tax:		
Rules for Highly Compensated Employee Investments					
	Total Investment	Before-Tax Investment	After-Tax Investment		
Investment Limited to (Percent of Earnings)	0.000	5.000	5.000		
Investment Reduced by (Percentage)					
Investments					
*Investment Option	*Description				
1	Growth Fund		+	-	
2	Investment Fund		+	-	
3	Money Market		+	-	
4	Treasury Bonds		+	-	

Employee Limit on Investments page

Use Special Accumulator

Enter a special accumulator to identify eligible earnings for calculating employee deductions. Special Accumulators are set up using the Special Accumulator Table.

Plan Contribution

Select who will be a contributor to this savings plan:

EE Contribution Optional (employee contribution optional): You might use this for plans that feature an employer nonmatching contribution, with voluntary additional employee contributions. This might also be used for a zero-contribution enrollment plan allowing for rollover funds.

EE Contribution Required (employee contribution required): This option enables employer matching.

Employer Only (NO EE) (employer only [no employee]): This could be used to establish an employer-funded savings benefit.

Total Investment (Up to Threshold), Before-Tax (Up to Threshold), and After-Tax (Up to Threshold)	Enter the before-tax, after-tax, and total percentage of earnings that an employee can invest, as long as the employee YTD earnings threshold has not been met.
Employee YTD Earnings Threshold	This amount is used to determine when the over-threshold limit applies. If left at zero, the up-to-threshold limits apply to all levels of earnings.
Total Investment (Over Threshold), Before-Tax (Over Threshold), and After-Tax (Over Threshold)	Enter the before-tax, after-tax, and total percentage amounts that an employee can invest after the YTD earnings threshold has been met.
Rules for Highly Compensated Employees Investments	In response to marginal or failed 401(k) and 401(m) nondiscrimination testing, you may need to reduce investments by highly compensated employees (HCEs) in order to comply with regulations. For example, you could set a lower 8% before-tax contribution cap on HCEs or set up a 2% reduction on each HCE's elected contribution to bring deferrals into compliance. Depending on the results of the nondiscrimination testing, you can adjust the limits throughout the year.
Investment Option	Enter a numerical identifier for each investment option.

Note. U.S. federal government users enter an alphabetical identifier.

Defining Employer Match or Other Contributions

Access the Employer Contribution/Match page.

Employee Limit on Investments		Employer Contribution/Match		Rollover of Funds	
Plan Type:	40	401(k)			
Benefit Plan:	BP0001	401(A) Savings			
Savings Plan Information Find View All First 1 of 1 Last					
Effective Date: 01/01/1980					
Employee YTD Earning Threshold:		\$0.00		Service Step Table ID: 🔍	
Before Tax Matching or Contribution			After Tax Matching or Contribution		
☐ Flat Amount Per Pay Period ☐ Pct of Employee Investment ☐ Pct of Special Accumulator ☐ Service Step Table ☐ Special Calculation Routine ☒ None			☐ Flat Amount Per Pay Period ☒ Pct of Employee Investment Percentage Match 50.000 ☐ Pct of Special Accumulator ☐ Service Step Table ☐ Special Calculation Routine ☐ None		
Employer Investment Limits					
Maximum Total Employee Contributions eligible for matching (or Maximum Total Employer non-matching Contributions)			per Pay Period		
		And/Or	3.000	Percent of Earnings	
Maximum Employee Contributions eligible for matching (or Maximum Employer non-matching Contributions)		Before-tax:		Percent of Earnings	
		After-tax:	3.000	Percent of Earnings	

Employer Contribution/Match page

Service Step Table ID

Use to link the rate of employer matching contributions to an employee's length of service.

If you enter a service step table ID, the system automatically selects Service Step Table in the Before-Tax Matching or Contribution and After-Tax Matching or Contribution group boxes.

Flat Amount Per Pay Period

Applies to nonmatching contributions. Select and enter the dollar amount the employer will contribute per pay period regardless of the amount an employee contributes.

Percent of Employee Investment

Applies to matching contributions. Select and enter a percentage of an employee contribution in the Under Threshold field.

Percent of Special Accumulator

Applies to nonmatching contributions. Select and enter a percentage of an employer contribution in the Under Threshold and Over Threshold fields.

The Over Threshold field is optional; if left blank, the system uses the employee YTD earnings threshold from the Employee Limit on Investments page.

Special Calculation Routine Uses a custom routine not supported by the standard PeopleSoft system. You must modify your COBOL programs.

Employer Investment Limits

You can define the maximum amount the employer contributes to a savings plan, either on a matching or nonmatching basis.

When defining a plan that has an employer match, this defines the maximum amount of employee funds eligible for matching, rather than defining the amount of the employer match itself.

For example, your organization might match 50% of an employee's contributions, but only on a before-tax basis, up to 6% of earnings or 1,000 USD per pay period, whichever is less. You would enter 6% in the Before-Tax field and 1000 in the Maximum Total Employee Contributions eligible for matching per Pay Period field.

When defining a nonmatching contribution plan, this defines the actual amount an employer contributes.

For example, your organization might fund savings plans with before-tax dollars at 3% of the employee's earnings, up to 500 USD per pay period. You would enter 3% in the Before-Tax field and 500 in the Maximum Total Employee Contributions eligible for matching per Pay Period field.

Note. Do not combine matching and nonmatching funds in the same plan.

The combination of percentage amounts for before-tax matching and after-tax matching cannot be greater than the total employee contributions.

Setting Up Employee Rollover Options

Access the Rollover of Funds page.

Employee Limit on Investments Employer Contribution/Match **Rollover of Funds**

Plan Type: 40 401(k)

Benefit Plan: BP0001 401(A) Savings

Savings Plan Information Find | View All First 1 of 1 Last

Effective Date: 01/01/1980 **Use Special Accumulator:** BH1

Rollover Options

☒ None

☐ Specified at Plan Level

☐ Specified at Employee Level

☐ Refund Excess Over Limit

Payroll Interface Option

☐ Calculate Pct of Annual Rate

Rollover of Funds page

Note. Employer-only plans cannot receive rollovers from another plan, because rollovers are a form of employee contribution.

Rollover Options

Choose from the following:

None: Rollovers are not allowed.

Specified at Plan Level: Rollover amounts are based on information entered on the benefit plan pages. Enter the plan type, benefit plan, deduction code, and class for either before-tax or after-tax or both.

Specified at Employee Level: Rollover amounts are based employee enrollment pages. The plan type, benefit plan, deduction code, and class for either before-tax or after-tax or both are made on employee enrollment records.

Refund Excess Over Limit: Use with 403(b) plans, where the limiting of employee contributions is more dynamic. In certain situations, employee's contributions are not limited as quickly as they should be. On subsequent pay runs, the system may determine the employee was allowed to contribute too much. This option enables the system to reduce prior contributions in excess of the current limit by creating a refund or negative deduction of the excess deferral amount.

Note. *Specified at Plan Level* and *Specified at Employee Level* require that the employee be enrolled in the specified rollover savings plan before the actual rollover event occurs during a payroll run. If you want a savings plan to receive rollover funds without active employee contributions, set up the plan as Employee Contribution Optional on the Employee Limit on Investments page and enroll employees with a zero contribution amount.

Calculate Pct of Annual Rate (calculate percentage of annual rate)

Select to tell PeopleSoft Payroll Interface to calculate deductions for a savings plan. PeopleSoft Payroll Interface estimates employee deductions using an employee's annual compensation rate.

This is considered an estimate because the annual rates and actual earnings, not available to Payroll Interface, are not necessarily the same. Also, there are no year-to-date accumulators available to apply regulatory limits.

With the exception of savings plan deductions, PeopleSoft Payroll Interface does not calculate deductions that are based on a percentage of an employee's earnings. To calculate such deductions, you need either PeopleSoft Payroll for North America or an appropriate interface with another payroll system.

Setting Up Leave Plans

This section describes how to:

- Enter leave plan details.
- (USF) Set up automatic accrual processing for federal employees.

Before you begin, make sure you have created earnings codes for the leave plans.

Note. The payroll tables summarized in this section are from PeopleSoft Payroll for North America. If your organization does not implement PeopleSoft Payroll for North America, work with your payroll department to ensure that the system has access to the proper data for leave accrual processing.

See Also

Chapter 3, “Setting Up Core Human Resources Base Benefits Tables,” [Setting Up Calculation Rules](#), page 26

Page Used to Set Up Leave Plans

Page Name	Object Name	Navigation	Usage
Leave Plan Table	LEAVE_PLAN_TABLE	Set Up HRMS, Product Related, Base Benefits, Plan Attributes, Leave Plan Table	Define leave plan details.

Entering Leave Plan Details

Access the Leave Plan Table page.

Leave Plan Table

Plan Type:

50

Sick

Benefit Plan:

BP0066

Test Sick Leave

Leave Plans

Find | View All

First 1 of 1 Last

*Effective Date:

01/01/1980

☒ Balance Visible to EE for Self-Service

Accrual Process Date:

Accrual Calculation

*Service Units:

Months

*Accrual Rate Units:

Hours per Month

Award Frequency:

First Run of Month

Automatic Accrual Processing

☐ Special Calculation Routine

*Max Leave Balance:

80.000

☐ Service Calc at Year Begin

Max Leave Carryover:

40.000

Leave Plan Table page (1 of 2)

Manual Accrual Processing

First Year Award Values [Customize](#) | [Find](#) | [View All](#) | First 1 of 1 Last

*Employment Month	*Hours Earned	*Month Eligible
0		

Accrual Rate Values [Customize](#) | [Find](#) | [View All](#) | First 1-3 of 3 Last

After Service Interval		*Accrue Hours At			
0	Service Months	4.000000	Hours per Month		
12	Service Months	6.000000	Hours per Month		
48	Service Months	8.000000	Hours per Month		

Service Bonus Values [Customize](#) | [Find](#) | [View All](#) | First 1-3 of 3 Last

After Service Interval		*Award Bonus Hours			
0	Service Months	16.000000			
60	Service Months	32.000000			
120	Service Months	40.000000			

[Find](#) | [View All](#) First 1 of 1 Last

Leave Plan Table page (2 of 2)

Balance Visible to EE for Self-Service

Select to allow employees to view their leave balances on the self-service transaction View Paycheck.

Accrual Process Date

Automatically displays the date on which the leave accrual calculation process was last run.

Service Units

Select a unit by which length of service is calculated.

If you select *Months*, the system uses the service date on the employee employment record as the basis for accrued service. If you select *Hours*, the system uses the actual hours from the appropriate earnings code maintained by PeopleSoft Payroll for North America.

Accrual Rate Units

The unit by which the accrual rate is quoted. Accrual awards are always measured in hours.

Hours Per Hour: Leave hours accrued on an hourly basis.

HoursPper Month: Leave hours accrued on a monthly basis.

Hours Per Pay Period: Leave hours accrued on a pay period basis. For US Federal users only. Defines the hours an employee will accrue per pay period.

Hours Per Week: Leave hours accrued on a weekly basis.

Hours Per Year: Leave hours accrued on a per year basis.

Award Frequency	Displays how often the leave accrual award is given to employees. Determined by the accrual rate unit. • If the accrual rate unit is Hours per Hour, then the award frequency is Every Run. • If the accrual rate unit is Hours per Month, then the award frequency is First Run of Month. • If the accrual rate unit is Hours per Year, then the award frequency is First Run of Year.
Automatic Accrual Processing	Defines how leave hours are calculated. <i>Special Calculation Routine</i> means your company has a custom calculation method. <i>Service Calc at Year Begin (service calculation at year begin)</i> calculates leave hours according to length of service as of January 1 of the current year. <i>Max Leave Balance</i> (maximum leave balance) defines the maximum leave hours an employee can accrue. If there is no maximum, enter 9999. <i>Max Leave Carryover</i> (maximum leave carryover) defines the maximum number of hours an employee can carry from one calendar year to the next. If there is no maximum, enter 9999.
Manual Accrual Processing	The values that you enter here are for reference only; they do not affect leave accrual processing in any way.
First Year Award Values	For leave plans with annual accruals, use to define a leave plan in which, during the first year of service, leave hours are prorated based on the month employment begins. Only available when the leave plan's accrual rate unit is Hours Per Year. Although the award frequency for annual accrual leave plans is First Run of Year, you will actually run the Leave Accrual process each month to process the first year award values exclusively. After the first year, employees receive awards only on the first run of the year, as planned.
Accrual Rate Values	Defines how your employees accrue leave time. Directly tied to what you selected in the Service Units field.
Service Bonus Values	Defines how employees accrue bonus hours (in addition to regular leave accruals).

Setting Up FMLA Plans

The Family Medical Leave Act (FMLA) protects health benefits and job restoration for U.S. employees who must take a leave from work to care for themselves or family members. The FMLA contains provisions regarding employer coverage, employee eligibility and entitlement, notice and certification, continuation of health benefits, and job restoration.

Because an FMLA plan is an entitlement type of leave plan, it is managed separately from your other enrolled leave plans. This section describes how to:

- Activate FMLA administration.
- Enter FMLA plan details.

See Also

Chapter 12, “Managing FMLA Plans,” page 179

Page Used to Set Up FMLA Plans

Page Name	Object Name	Navigation	Usage
FMLA Plan Table	FMLA_PLAN_TBL	Set Up HRMS, Product Related, Base Benefits, FMLA (Family Medical Leave), FMLA Plan Table	Define FMLA plans and set administration parameters.

Activating FMLA Administration

This section explains how you activate FMLA administration.

To activate FMLA Administration:

1. Access the Product Specific page on the Installation Table.
2. Select FMLA Administration in the Benefits Functions group box.

This enables you to gain access to pages and fields for setting up and administering FMLA plan balances.

See Also

PeopleSoft 8.8 Application Fundamentals for HRMS PeopleBook, “Installing PeopleSoft HRMS,”
Entering Product- and Industry-Specific Installation Information

Entering FMLA Plan Details

Access the FMLA Plan Table page.

FMLA Plan Table	
FMLA Plan ID:	BB1
FMLA Plans Find View All First 1 of 1 Last	
*Effective Date:	01/01/1980
*Status:	Active
*Description:	Test RB w/Standard Hrs
Short Description:	RB1 RBckwd
FMLA Calendar Type	
*Calendar Type:	Roll-Backward
Annual Entitlement	
*Annual Entitlement:	12.0 weeks
Eligibility Criteria	
*Minimum Service Weeks Required:	52
*Minimum Earned Hours Required:	1250
Source of Hours	
*Use Standard or Payroll Hours:	Std Hrs

FMLA Plan Table page

Calendar Type

Employees eligible for FMLA protected leave are entitled to at least 12 weeks of leave during each 12 month “FMLA year.” There are three different ways to define the FMLA year:

Fixed Calendar: Defines a 12 month period with a specific starting date (defined with the Begin Month and Begin Day fields). It can be the calendar year, fiscal year, or a 12 month period that is defined by state law. Employees with Fixed Calendar FMLA leave plans are entitled to the defined annual entitlement, less any FMLA protected leave taken in the current fixed calendar year. The eligibility weeks for an FMLA request that is made using a fixed calendar year are reduced according to the date the request is made.

Roll-Forward: Begins the FMLA year when employees take an FMLA protected leave and ends 12 months later. Employees’ next FMLA year begins with the first FMLA protected leave they take after the first 12 month FMLA year has passed.

Roll-Backward: Counts the FMLA year backwards for 12 months from the time that employees take FMLA protected leave. If employees have taken FMLA leave in the year previous to their scheduled FMLA leave start date, that amount of leave is subtracted from their annual entitlement for the upcoming FMLA protected leave request.

Annual Entitlement

Defines the number of weeks of FMLA protected leave that employees are entitled to every FMLA year. You can define an entitlement of more than the government-mandated 12 weeks, but not less.

Minimum Service Weeks Required and Minimum Earned Hours Required

Use to define the length of service requirements that must be met before an employee is eligible for FMLA coverage. According to the standards set by the FMLA, the values for these fields cannot be greater than 52 weeks (12 months) and 1,250 hours, respectively.

Working any portion of a week counts as a full week of employment, which enables part-time and seasonal employees to meet this requirement. The weeks of employment are also not required to be consecutive, which means that employees rehired after a gap in employment may still meet this requirement. The Earned Hours Required field enables the definition of a specific number of hours (up to 1,250) that an employee must have worked for the company during the previous 52 weeks in order to qualify for FMLA coverage.

Use Standard or Payroll Hours

If you use PeopleSoft Payroll for North America, define how earned hours required and entitlement hours are calculated.

Std Hrs (standard hours): Calculates the earned hours using standard hours per work week. The system determines standard hours per work week from the employee Job record effective as of the leave begin date.

Pay Hrs (payroll hours): Calculates the standard hours using the actual hours worked per week during the 52 weeks prior to the request begin date. Provides more accuracy for employees who work an irregular schedule.

If payroll hours are used, you must establish an FMLA hours special accumulator to track FMLA hours. Special accumulators and their codes are defined through the Special Accumulator Table.

Note. If you do not use PeopleSoft Payroll for North America, the *Pay Hrs* option is not allowed.

See Also

[Chapter 3, “Setting Up Core Human Resources Base Benefits Tables,” Setting Up Special Accumulators, page 35](#)

Setting Up FSA Plans

Flexible spending accounts (FSAs) are before-tax employee savings plans that can be used for certain approved expenses, such as health care or dependent care. The following plan types are predefined for FSAs:

- Plan type 60 - FSA health care for U.S. companies.
- Plan type 61 - FSA dependent care U.S. companies.
- Plan type 65 - FSA health care for Canadian companies.
- Plan type 66 - Canadian retirement counseling accounts.

Page Used to Set Up FSA Plans

Page Name	Object Name	Navigation	Usage
FSA Benefit Plan	FSA_BENEFITS_TABLE	Set Up HRMS, Product Related, Base Benefits, Plan Attributes, FSA Benefits Table	Define FSA plan details for US and Canada.

Entering FSA Plan Details

Access the FSA Benefit Plan page.

FSA Benefit Plan

Plan Type: 60 Flex Spending Health - U.S.
Benefit Plan: BP0016 COBBAS Testing FSA

FSA Plans Find | View All First 1 of 1 Last

*Effective Date: 01/01/1980 SetID: BNUSA Balance ID: CY
 Contribution Frequency: M Monthly

Employer Contribution

*Employer Contribution: None

FSA Benefit Plan page

Balance ID

The system uses the pay period end date or check date and the schedule of balance periods associated with this balance ID to calculate FSA deductions.

Contribution Frequency

Select a frequency to define how you quote amounts for this FSA benefit plan.

If, when entering an employee's FSA election, an employee contribution percentage is specified in addition to an annual pledge, it is specified in terms of this contribution frequency.

Employer Contribution

Define an employer matching contribution:

None: No employer match is contributed.

Flat Amount: Matches the employee contribution with a flat amount that you enter, up to a chosen percent limit.

Percent of Employee Contribution: Matches a percent of the employee contribution that you enter, up to a limit that you define.

Special Calculation Routine: Uses a custom routine not supported by the standard PeopleSoft system.

(CAN) Employer Carryforward Choice

Carry forward credit or claim amounts from one plan year to the next.

(CAN) Future Borrowing

Select to allow plan enrollees to spend FSA credits prior to their inclusion within the plan year.

Setting Up Retirement Plans

You can set up retirement plans for PERS (the California Public Employees Retirement System) or the U.S. federal government.

Page Used to Set Up Retirement Plans

Page Name	Object Name	Navigation	Usage
Retirement Plan	RTRMNT_PLAN_TABLE	Set Up HRMS, Product Related, Base Benefits, Plan Attributes, Retirement Plan Table	Set up California PERS or U.S. federal government retirement plans.

Entering Retirement Plan Details

Access the Retirement Plan page.

Retirement Plan

Plan Type: 70 PERS

Benefit Plan: 1 Civil Service Retirement Sys

Retirement Plans Find | View All First 1 of 1 Last

***Effective Date:** 01/01/1980

Employer Contribution Percent: 10.000

Employee Contribution Percent: 7.000

Employer Contribution to Employee %

Use Special Accumulator Instead of Gross LRE

☐ **Coordinate with FICA**

Retirement Plan Page

Employer Contribution to Employee % (employer contribution to employee percentage)

Define how much the employer contributes to the employee's total contribution percentage.

Use Special Accumulator Instead of Gross

To have the system use a special accumulator instead of the total gross, enter the desired accumulator code here.

To use a special accumulator, work with your Payroll department to define the code and its detail. You can set up special accumulators—as many as you need—to process savings, retirement, and pension plans.

(USF) Federal Retirement Plans

Federal employees who are enrolled in FERS retirement plans are automatically enrolled in a TSP 1% Agency Contribution plan as well. In this plan, the employee's agency contributes 1% of the employee's basic pay for each pay period to the employee's TSP account. The TSP 1% Agency Contribution plan is predefined; its benefits do not take the place of those offered by other retirement plans. Employees enrolled in the TSP 1% Agency Contribution plan receive these contributions whether or not they contribute their own money to their TSP accounts.

Select *OASDI Offset* and *Subject to OASDI* for retirement plans that have employee contributions offset by employee contributions to OASDI. The system reduces employee retirement plan contributions by the OASDI contribution amount until the maximum OASDI/FICA contribution level is reached.

See Also

[Chapter 3, “Setting Up Core Human Resources Base Benefits Tables,” Setting Up Special Accumulators, page 35](#)

[Chapter 8, “Enrolling Participants,” Enrolling Employees in the TSP Agency Automatic Contribution Plan, page 141](#)

Setting Up U.S. Pension Plans

U.S. pension plans are also managed by PeopleSoft Pension Administration. However, the pension plan must be set up in the Base Benefits business process.

See Also

PeopleSoft 8.8 Pension Administration PeopleBook

Page Used to Set Up Pension Plans

Page Name	Object Name	Navigation	Usage
Pension Plan Table	PENS_PLAN_TABLE_US	Set Up HRMS, Product Related, Base Benefits, Plan Attributes, Pension Plan Table	Enter details for U.S.-defined pension plans.
Pension Plan Table 1	PENSION_PLAN_TABLE	Set Up HRMS, Product Related, Base Benefits, Plan Attributes, Pension Plan Table CAN	Enter details for Canadian-defined pension plans.

Entering Pension Plan Details

Access the Pension Plan Table page.

Pension Plan Table	
Benefit Plan:	BP0124 Standard Pension Plan
Plan Type:	82 Pension Plan 1 - U.S.
Effective Date:	01/01/1980
US Pension Plans Find View All First 1 of 1 Last	
*Effective Date:	01/01/1980
*Pension Type:	Qualified ☐ Allow Contingent Beneficiaries
Plan Yr Begins (Month/Day):	1 1
Plan Yr Ends (Month/Day):	12 31
Contributory Plans	
☒ Voluntary Contributions Allowed	Special Accumulator Code: BH1
Rates of Deduction:	
5.000 % up to	100,000 and 1.000 % over: 100,000

Pension Plan Table page

Allow Contingent Beneficiaries

Select if the plan allows nonspouse beneficiaries.

Plan Yr Begins (Month/Day) (plan year begins [month/day]) and **Plan Yr Ends (Month/Day)** (plan year ends [month/day])

Specify the month and day when your plan year begins. A plan year normally ends the day before the next one begins. However, if you change your plan year, the row for the resulting short plan year will have nonconsecutive begin and end dates.

Be sure to include a row for a short plan year. Failure to do this can cause calculation errors.

Contributory Plans

You can only incorporate U.S. pension plans (plan types 82 to 87) into a manual or automated benefit program if the plan is defined as a contributory plan in which the employee contributes some portion of earnings to the plan.

Note. The system makes no determination as to whether the rules that you set up meet Internal Revenue Code qualification standards. Such compliance is your responsibility.

Voluntary Contributions Allowed

There are no parameters for defining voluntary contribution rates; these are established on an employee-by-employee basis when you enroll employees in the plan.

Special Accumulator Code

Enter the code that tracks pensionable earnings.

Rates of Deduction

Enter contribution rates. You can have different rates above and below a threshold. For example, employees can contribute 2% of earnings up to 50,000 USD and 3% of earnings above that. Enter the rate up to the threshold in the first Rates of Deduction field, the threshold in the next field, and the rate beyond the threshold in the final field.

If the threshold changes—for example, if you use the Taxable Wage Base (TWB) as the threshold—insert additional effective-dated rows to record the changes.

(CAN) Entering Pension Plan Details

Access the Pension Plan Table 1 page.

Pension Plan Table 1

Plan Type: 80 Standard Pension
Benefit Plan: BP0062 Test Pension

Pension Plans Find | View All First 1 of 1 Last

***Effective Date:** 01/01/1994

Use Special Accumulator Instead of Gross BH3 ☒ **Based on YTD**

***Pension Plan Type:** Def Benefit

☒ **Voluntary Contributions Allowed**
☒ **Coordinate with CPP**

Plan Registration #:

Pension Plan Table 1 page (1 of 2)

Contribution Percent

***Rate Type:** None

Contribution & Up to YMPE
 Employee % 10.000 Employer %

Contribution & Over YMPE
 Employee % 5.000 Employer %

Contribution Percent Customize | Find | View All First 1 of 1 Last

Earnings Limit Contribution Up to YMPE Contribution Over YMPE

Annual Rate

Defined Benefit PA Factors

PA Pct for Earns Under YMPE: 1.400
PA Pct for Earns over YMPE: 2.000
PA Exclude Earns From/To: 34000.00 85000.00
PA Benefit Entitlement Ceiling: 1277.78
PA Annual Base Hours: 2080.00

Find | View All First 1 of 1 Last

Pension Plan Table 1 page (2 of 2)

Setting Up Vacation Buy/Sell Plans

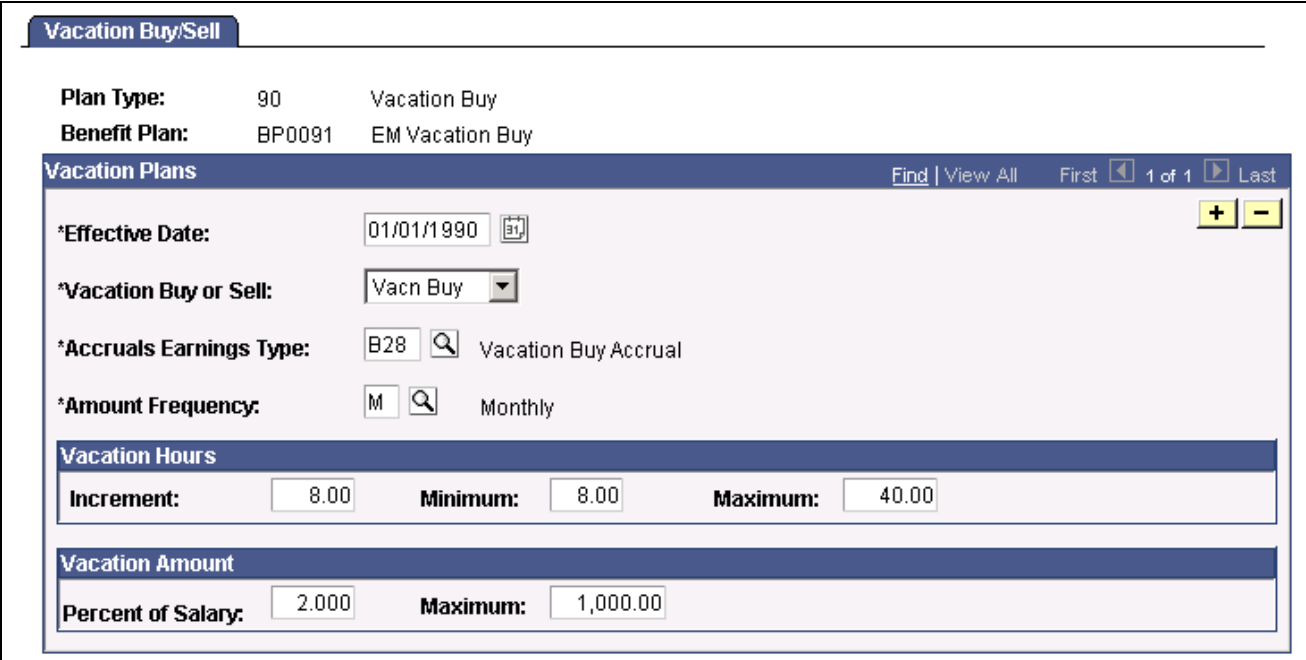
With a vacation buy plan, employees can use earnings to gain more vacation days. With vacation sell, they contribute vacation hours for cash.

Page Used to Set Up Vacation Buy/Sell Plans

Page Name	Object Name	Navigation	Usage
Vacation Buy/Sell	VACATION_TABLE	Set Up HRMS, Product Related, Base Benefits, Plan Attributes, Vacation Buy/Sell Table	Enter details for vacation buy/sell plans.

Entering Vacation Buy/Sell Plan Details

Access the Vacation Buy/Sell page.



Vacation Buy/Sell

Plan Type: 90 Vacation Buy
Benefit Plan: BP0091 EM Vacation Buy

Vacation Plans Find | View All First 1 of 1 Last

*Effective Date: 01/01/1990

*Vacation Buy or Sell: Vacn Buy

*Accruals Earnings Type: B28 Vacation Buy Accrual

*Amount Frequency: M Monthly

Vacation Hours

Increment: 8.00 Minimum: 8.00 Maximum: 40.00

Vacation Amount

Percent of Salary: 2.000 Maximum: 1,000.00

Vacation Buy/Sell page

Vacation Buy or Sell

Vacation Buy is predefined plan type 90; Vacation Sell is plan type 91.

Accruals Earnings Type

Defined on the Earnings Table for PeopleSoft Payroll for North America.

When employees buy vacation, accrual balances increase. When employees sell vacation, accruals decrease.

Amount Frequency

Define the rate at which to store and calculate the value of vacation hours an employee buys or sells. This field is independent of pay period.

When an employee buys or sells vacation, two kinds of data are affected: leave accruals and pay. The first time you process leave accruals after an employee

buys or sells vacation hours, you see current leave accrual balances, based on the total vacation hours bought or sold. However, for employee pay, PeopleSoft Payroll for North America spreads the vacation buy or sell amount over the remainder of the calendar year. This is done with the help of the amount frequency and accruals earnings type that you define.

**Vacation Hours and
Vacation Amount**

When an employee buys or sells vacation, the system verifies that the amount is at least the minimum, not more than the maximum, and in the increment that you define. The system also verifies that the value of the hours bought or sold does not exceed the percent of salary or the maximum amount.

See Also

Chapter 13, “Managing Leave Plans,” page 189

Chapter 14, “Managing Vacation Buy/Sell Plans,” page 195

CHAPTER 5

Building Base Benefit Programs

This chapter provides an overview of benefit programs and discusses how to:

- Build benefit programs.
- Build benefit programs with the Benefit Program Table components.
- Clone benefit programs, eligibility rules, or event rules.

Building Benefit Programs

This section provides an overview of benefit programs and discusses the components that make up a benefit program.

See Also

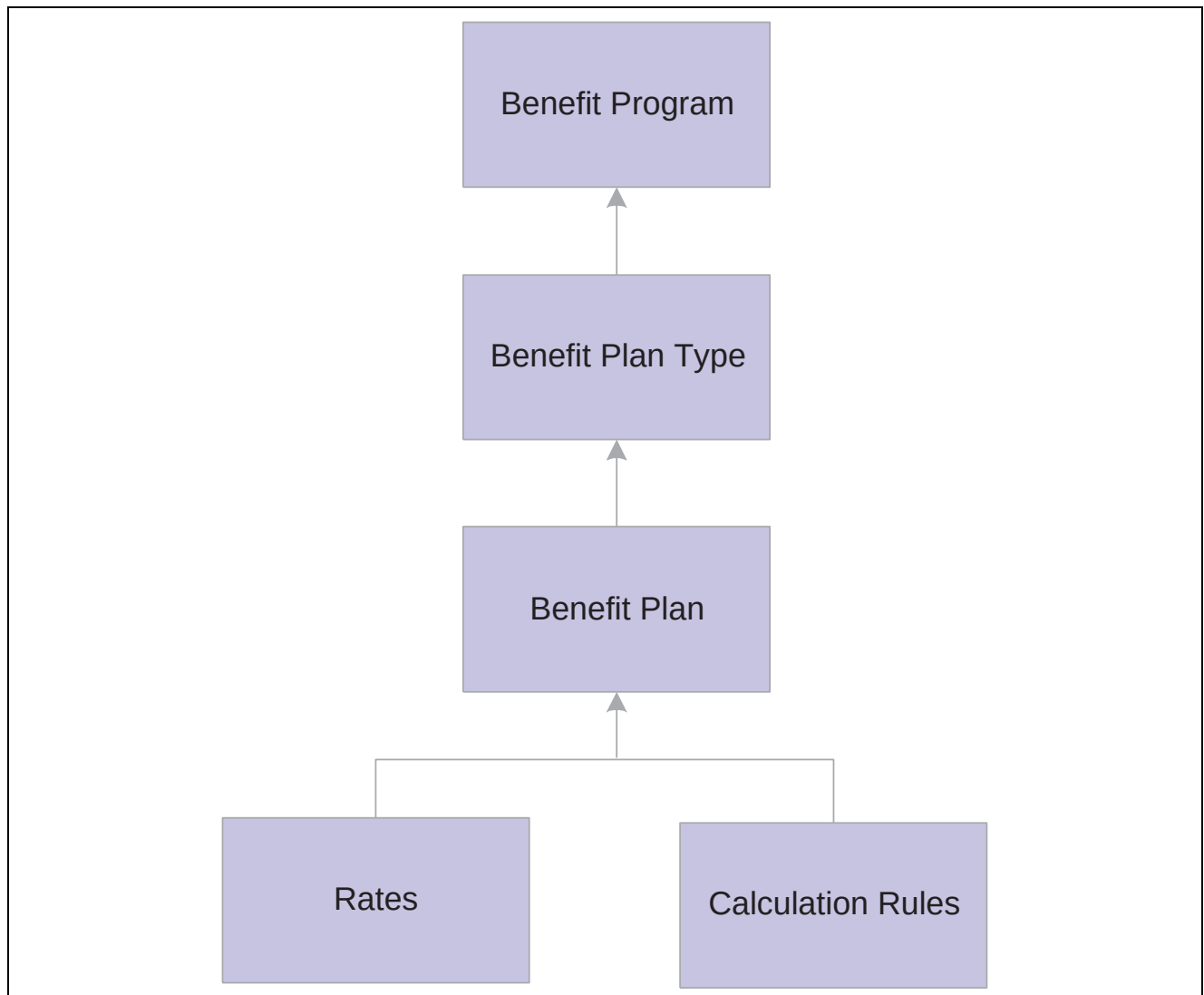
[Chapter 4, “Setting Up Benefit Plans,” page 45](#)

PeopleSoft 8.8 Benefits Administration PeopleBook, “Building Automated Benefit Programs”

Understanding Benefit Programs

A Benefit program is a collection of benefits that are offered to a group of employees. You may have multiple benefit programs if you offer different benefits to different groups of employees, charge different premiums, or administer enrollment rules differently for various employee groups.

Use the Benefit Program Table to establish a program for employees, link the appropriate plan types to it, and associate a variety of rules. The Benefit Program Table brings together all of the information that relates to a benefit program, including whether to process enrollments manually or use PeopleSoft Benefits Administration automated enrollment.



Building Blocks for Benefit Programs

Understanding Plan Types

Plan types are essential in a benefit program. They group individual plans or options that may be elected by an employee for a particular type of benefit, such as Basic Life Insurance or Medical.

Understanding Plans

Plans are the individual benefits into which an employee may be enrolled. A Plan is always subordinate to a Plan Type. For example, you may offer employees a choice of four different medical plans, each from a different HMO or plan provider. In this case, you would be offering four different plans in the Medical plan type. Each plan has an associated deduction code, set of rates, and calculation rules.

Understanding Effective Dates

To keep your benefit program accurate and consistent, the benefit plans, calculation rules, and options must be individually effective-dated in a coherent, logical manner. If they aren't, your benefit program will be left open to a variety of errors.

Effective-dating is an efficient way for you to maintain accurate records of your benefits information. You can create historical records and enter future-dated information at your convenience, all because when you enter information, you also enter an effective date that is *synchronized* with the effective dates for the other elements of the benefit program.

Provider and Benefit Plan Effective Dates: An Example of Effective-Dating

Consider provider and benefit plan information. To set up a provider, enter its effective date on the Provider Table. To set up a benefit plan, enter the plan's effective date and identify its provider on the Benefit Plan Table. The system checks that the provider is effective earlier or on the same date as the benefit plan; otherwise, the provider information cannot exist for the benefit plan.

Benefit Programs and Effective Dates

Things get more complicated when you associate a set of rates and calculation rules, which also have effective dates, to a benefit program and its associated benefit plans. The system reviews the effective dates of the program, the plan, the rates, and the calculation rules. The system can't check that you've set up the correct dates, because it's possible that any date could be correct. Instead, it goes by the benefit program.

The system looks for effective dates for the benefit program that you're working with and the set of benefit plans that you associate with that benefit program. A benefit program and benefit plan combination is effective based on both sets of dates.

Plans associated with a benefit program can't be "in effect" unless their effective dates are set on or after the effective date of the benefit program. Similarly, the rates and calculation rules that you associate with the plans can't be in effect unless their effective dates are set on or after the dates of their respective plans.

If a benefit program and benefit plan combination is not effective when you think it should be, or if you press F4 for a list of valid benefit plans and your plan does not appear, check the effective dates of the benefit program and the benefit plan. The effective date of the benefit plan must be earlier or the same as the effective date of the benefit program.

Loading History: A Warning

When you're setting up tables, you must set effective dates to reflect when you want the data to go into effect. If you load employee history, make sure that you establish an early effective date. When preparing for a conversion, set all effective dates to the same date. Most tables also have a Status, which you would normally leave as *Active*.

Building Benefit Programs With the Benefit Program Table Components

In this section, we discuss building basic benefit programs and how to:

- Define basic benefit program information.
- Associate plan types with a benefit program.
- Link a benefit program and plan type to rate and calculation rules.
- Set up benefit programs that provide benefits to nonqualified dependents.

Pages Used to Build Benefit Programs With the Benefit Program Table Components

Page Name	Object Name	Navigation	Usage
Benefit Program Table - Benefit Program	BEN_PROG_DEFN1	Set Up HRMS, Product Related, Base Benefits, Program Structure, Benefit Program Table	Define basic benefit program information.
Benefit Program Table - Plan Type and Option	BEN_PROG_DEFN2	• Set UP HRMS, Product Related, Base Benefits, Program Structure, Benefit Program Table • Click the Plan Type and Option Tab.	Link plan types to the benefit program and add important information about plan types.
Benefit Program Table - Cost	BEN_PROG_DEFN3	• Set UP HRMS, Product Related, Base Benefits, Program Structure, Benefit Program Table • Click the Cost tab.	Link a benefit program and plan type to rate and calculation rules.

Defining Basic Benefit Program Information

Access the Benefit Program page.

Benefit Program	Plan Type and Option	Cost
Benefit Program: B01 Effective Date: 01/01/1998 *Description: BAS Eligibility 1 Short Description: BAS Elig 1	Status as of Effective Date: Active Program Type: Automated Currency Code: USD	
Dependent Limits Dependent Age Limit: 18 Student Age Limit: 22 ☒ Exclude Disabled from Age Lmt. ☒ Dep Ineligible if Married		
COBRA COBRA Surcharge %: ☐ COBRA Disabled Surcharge %: ☐		
FMLA FMLA Plan ID: KUB Roll-Bkwd		
Benefits Administration Apply Excess Credits to: C Cash		
FSA Flexible Spending Acct Run ID: FSA Minimum Check Amount: 0.00 FSA Maximum Annual Pledge: 7000.00		
Self-Service Configuration ☒ Show Credits on Enrollmnt Form ☐ Include Can Sales Tax on Form Cost Freq on Enrollment Form: Annual Handbook URL ID:		

Benefit Program page

Effective Date	Date the row in the table becomes effective. This date determines when you can view and change information.
Status as of Effective Date	Indicates whether a row in the table is <i>Active</i> or <i>Inactive</i> . Processes ignore benefit programs designated as <i>Inactive</i> , even if the effective date defines the program as current.
Program Type	The type of program can be <i>Manual</i> or <i>Automated</i> . If you are using only Base Benefits, it is automatically set to <i>Manual</i> . If you activate PeopleSoft Benefits Administration on the Installation Table, it is automatically set to <i>Automated</i> .
Currency Code	This refers to the type of currency that is used for this program's benefit and deduction calculations.

Dependent Limits

This group box defines the age at which dependents are no longer eligible for health benefits.

Dependent Age Limit and Student Age Limit	Defines the age at which a dependent is no longer considered to be a dependent or a student.
Exclude Disabled from Age Lmt. (exclude disabled from age limit)	Select to exclude disabled dependents from the age limits by selecting this check box.
Dep Ineligible if Married (dependent ineligible if married)	Select to consider married dependents ineligible for health benefits, regardless of their age.

Benefits Administration

This group box is available if Peoplesoft Benefits Administration is activated on the Installation Table. If you are using flexible credits, it is used to define how the system will process excess flexible credit amounts when an employee does not designate a rollover election during benefit enrollment.

Apply Excess Credits to	The system can convert excess flexible credit amounts to:
	<i>C</i> (Cash)
	<i>D</i> (FSA-Dependent Care)
	<i>F</i> (Forfeit Excess Credit)
	<i>H</i> (FSA-Health Care)
	<i>R</i> (FSA Retirement Counseling)
	<i>S</i> (Savings-401(k))

FSA (flexible spending account)

For FSA Administration users. Use this group box to set up your organization's business rules for flexible spending accounts.

Flexible Spending Acct Run ID (flexible spending account run ID)	For FSA Administration users. Enter the FSA Run ID that you created on the FSA Run Table.
FSA Minimum Check Amount	For FSA Administration users. Enter the minimum amount for which you will print a check.
FSA Maximum Annual Pledge	Enter the maximum amount an employee can pledge to deposit into a flexible spending account.

COBRA (consolidated omnibus budget reconciliation act)

This group box defines the rules regarding the surcharge amounts that your organization imposes on COBRA plans.

COBRA Surcharge % (COBRA surcharge percentage)	Enter the percentage amount of the benefit cost that you want added to the benefit cost. For example, if the cost of medical coverage is 100 USD and the COBRA surcharge % is 30%, the cost for medical coverage for someone on COBRA would be 130 USD.
COBRA Disabled Surcharge % (COBRA disabled surcharge percentage)	If you want a different percentage amount for a disabled person, enter that percentage amount. If you leave the field blank, the surcharge amount entered in the <i>COBRA Surcharge %</i> field will be applied to a disabled person with COBRA coverage.

Self-Service Configuration

Use this group box to define the rules for displaying and processing the PeopleSoft eBenefits application pages.

Show Credits on Enrollment Form (show credits on enrollment form)	Select if you want credit amounts to appear on the enrollment form. If you do not offer flexible credits, you may not want this heading to appear on the form.
(Can) Include Can Sales Tax on Form (include Canadian sales tax on form)	Select if you want Canadian sales tax information to display on the eBenefits Enrollment Summary page.
Cost Freq on Enrollment Form (cost frequency on enrollment form)	This defines how the cost of the benefits will appear on the enrollment form. Choose from the following valid values: <i>Annual:</i> Displays the costs as annual amounts. <i>Deduction:</i> Displays the costs as per-pay-period amounts.
Handbook URL ID (handbook uniform resource locator identification)	Enter the URL ID that connects to your benefit handbook. URL ID's are set up in the URL Table.

FMLA (Family Medical Leave Accounts)

Use this group box to define the rules for processing under the family medical leave act.

FMLA Plan ID (FMLA plan identification)	Enter the FMLA Plan ID that you created on the FMLA Plan Table.

See Also

PeopleSoft 8.8 Benefits Administration PeopleBook, “Setting Up Flexible Credits”

Associating Plan Types With a Benefit Program

Access the Plan Type and Option page.

Benefit Program: B01 **Effective Date:** 01/01/1998

Plan Type Find | View All First 1 of 14 Last

*Plan Type: 01 Benefit Program Minimum Annual Contribution: 0.00 + -

DispPlnSeq: 02 Maximum Annual Contribution: 0.00

Event Rules ID: B143 Event Maintenance ☐ HIPAA Plan

Waive Coverage: ☒ Not Applicable ☐ COBRA Plan Load Cross Plan Values

Self-Service Configuration

☒ Collect Dependent/Beneficiary ☒ Collect Fund Allocations ☒ Show if no choice

Domestic Coverage for: Handbook URL ID:

Option Customize | Find | View All First 1-2 of 2 Last

Optn ID	*Optn Type	Benefit Plan	Covrg Code	Deductn Cd	Option Code	Default Option	Opt Level	Option Seq	Geog Locn	Elig ID
1	P					☐		1		B193
2	G			B01-03		☐		2		

Plan Type and Options page – Eligibility tab

- Plan Type** Select the plan type that you want to add or display.
- Minimum Annual Contribution** Defines the minimum amount an employee can elect to deposit into an FSA account.
- DispPlnSeq** (display plan sequence) For Benefits Administration users. Indicates the order in which benefit plans appear. The default value is the plan type.
- Maximum Annual Contribution** Defines the maximum amount an employee can elect to deposit into an FSA account. This amount cannot be larger than the amount entered on the Benefit Program page.
- Event Rules ID** For Benefits Administration users. Select an event rule that you want to link to this benefit plan. Event Rules are set up on the Event Rules Table.
- HIPAA Plan** This field applies only to health plans. Select this check box if you want to designate that this plan be included in the HIPAA Report.
- Waive Coverage** For Benefits Administration users. Select the correct option that defines if and when employees are permitted to waive coverage for this plan type.
- COBRA Plan** Select to designate which health plan types (limited to Plan Types *1x* and *60*) are COBRA-qualified plan types. If you make this plan type COBRA-qualified, enter an option code for each of your plans. Otherwise, the Option Code field will be unavailable.
- Load Cross Plan Values** Click to automatically populate the cross-plan data for every option in this plan type.
For Benefit Administration users only.

Self-Service Configuration

Use this group box to define the rules for displaying enrollment and plan information on the PeopleSoft eBenefits pages.

Collect Dependent/Beneficiary	Select this check box when you want the system to collect information pertaining to dependents and benefits and display that information on the eBenefit Summary and the eBenefit Detail Information pages. This works in conjunction with the Ignore Dep/Ben flag on the Event Rules page.
Collect Fund Allocations	When this check box is selected, the system collects the information pertaining to savings plans and displays that information on the eBenefit Savings Summary and the Detail Information pages.
Show if no choice	This check box controls whether a plan type appears on the enrollment when the employee has no option to choose and cannot waive out of the option. A good example is paid vacation. Employees receive the benefit, but you don't display it on the enrollment form. If the check box is selected, the system displays the plan type in the enrollment form summary. When the check box is cleared, the system will not display the plan type.
Domestic Coverage for	This applies to only health plans. This field tells the system whether to display domestic coverage information along with the employee's coverage.
Handbook URL (uniform resource locator)	If you have a special handbook for this plan type, you can enter the URL ID. URL IDs are set up in the URL Table.

Option – Eligibility Tab

Enter the options available to the employee for the designated plan type in this section.

Optn ID (option ID)	As you define options for each of the plan types that are offered, the system automatically enters the option ID.
Optn Type (option type)	Each option row needs to have an option type designation. PeopleSoft Human Resources Base Benefits enables you to select from the following list of valid values: <i>O</i>: At least one option is required per plan type, except for plan type 01. Plan type 01 is used only for PeopleSoft Benefits Administration. It is also called the “Program” level of the benefit program and is used only by programs that run in conjunction with PeopleSoft Benefits Administration. <i>G</i>: Designates that this option is a general credit and used only in PeopleSoft Benefits Administration. <i>P</i>: This used only for plan type 01. It designates that this is a program and is required for automated benefit programs. Only one <i>P</i> row is allowed per benefit program.

W: Designates that waiving coverage is an option and is used only in PeopleSoft Benefits Administration.

Benefit Plan

Enter the code for a benefit plan that was defined on the Benefit Plan Table. If it is something other than a health plan, provide added detail in one of the various benefit plan detail pages.

Covrg Code (coverage code)

This applies only to health plan types. Indicate the level of coverage for health plans. It is a required field for those plan types. Coverage codes are defined on the Coverage Code Table.

Deductn Cd (deduction code)

Links the deduction code to the option.

Option Code

This field is available if the COBRA Plan check box is selected, or if this is a Benefits Administration (Automated) benefit program.

Default Option

Applies to PeopleSoft Benefits Administration. Select this check box if you want this option to be used as the default when the PeopleSoft Benefits Administration process validates, loads, or finalizes participant elections.

The default option is the benefit plan option that is given to employees who do not make an election and is used if the associated event rule has a default method of *Option* or *Current Else Option*. Plan type defaults are used as substitutes for a participant's election when you finalize the event. Here are some guidelines for setting default options:

- Only select a default option for plan types *1x* - *3x*, *5x*, *7x*, and *8x*.
- For *2x* plan types, do not define options that require coverage to be specified at the employee level as defaults.
- Only the *Waive Option Type* is allowed as a default for plan types *4x*, *6x*, and *9x*.
- Options requiring proof should not be set as defaults, although it is an option.

Opt Level (option level)

Applies to PeopleSoft Benefits Administration. Option level refers to the level of benefits coverage provided by the option. For example, suppose you're setting up a set of supplemental life options that will give employees the ability to choose a coverage of 1, 2, 3 or 4 times their annual salary. Set option level values for these options of *1*, *2*, *3*, and *4*, respectively.

The option level values are used by the system during event processing. The event rule, linked to the plan type to which these options belong, checks the option level when evaluating its change level rules. When an employee elects new coverage, the system compares the option level of the employee's new option election in that plan type with the employee's current option election. If the new election violates the associated event rule's Participate and Waive change level rules, the system rejects the employee's benefit option selection.

If, for example, the associated event rule's Maximum Number of Change Levels is 2, the system would prevent employees from changing their coverage more than two option levels in either direction. Therefore, an employee with

coverage equal to 1 times their annual salary would not be allowed to select coverage equal to 4 times their annual salary during open enrollment.

Option Seq (option sequence)

Applies to PeopleSoft Benefits Administration. Indicates the order in which benefit options appear. The default value is the Plan Type.

Geog Locn (geographic location)

Applies to PeopleSoft Benefits Administration. If you want to link a geographic location rule to this option, enter the code. Geographic location rules are set up on the Geographic Location Table.

Elig ID (eligibility ID)

Applies to PeopleSoft Benefits Administration. If you want to link an eligibility rule to this option, enter the eligibility rule ID. Eligibility rules are created on the Eligibility Rules Table.

Option – Cross Plan Tab

This tab is only for Benefit Administration users.

Optn ID (option identification)

As you define options for each of the plan types that are offered, the system automatically enters the option ID.

Covrg Code (coverage code)

This applies only to health plan types. Indicate the level of coverage for health plans. It is a required field for those plan types. Coverage codes are defined on the Coverage Code Table.

Deductn Cd (deduction code)

Links the deduction code to the option.

Option Code

The system displays the information created in the Eligibility section.

Cross Plan Type

If there is a cross-plan requirement for this option, enter the other plan type that must have an enrollment.

Cross Benefit Plan

This field is for automated benefit programs and indicates that enrollment in this option is dependent upon enrollment in a particular benefit plan entered in Cross-Plan Type field.

Coverage Limit

This field is for automated benefit programs and indicates that coverage is limited to a percentage of the employee's coverage amount in the other plan type.

Check Dependents

This field is for automated benefit programs and tells the system to check the dependent's enrollment in this plan against the dependent enrollments in the other plan type.

The following chart shows you how to fill out the Plan Type and Option page for Plan Types 01 through 9x:

Field	Value For Plan Type 01	Value for Plan Types 1x – 9x
Plan Type	01 (Plan type 01 not allowed within Base Benefits)	1x – 9x

Field	Value For Plan Type 01	Value for Plan Types 1x – 9x
Display Plan Sequence	N/A	Not allowed
Event Rules ID	N/A	Not allowed
Waive Coverage	N/A	Not allowed
COBRA Plan	N/A	Allowed for plan types 1x and 6x
HIPAA Plan	N/A	Allowed for 1x plan types
Option Type	N/A	O - Only option type allowed for plan types 1x - 9x
Benefit Plan	N/A	Required
Coverage Code	N/A	Required for plan type 1x, not allowed for plan types 2x - 9x
Default Option Indicator	N/A	Not allowed
Deduction Code	N/A	Required
Option Sequence	N/A	Not allowed
Option Code	N/A	Not allowed, unless plan type 1x or 60 has been designated as a COBRA plan, in which case the Option Code is required.
Option Level	N/A	Not allowed
Geographic Location Table ID	N/A	Not allowed
Eligibility Rules ID	N/A	Not allowed
Cross-PlanType	N/A	Not allowed
Cross-Plan	N/A	Not allowed

Field	Value For Plan Type 01	Value for Plan Types 1x – 9x
Cross-Plan Limit Percentage	N/A	Not allowed
Cross-Plan Dependent	N/A	Not allowed

See Also

PeopleSoft 8.8 Application Fundamentals for HRMS PeopleBook, “PeopleSoft Application Fundamentals for HRMS Reports,” Manage Base Benefits Reports

[Chapter 8, “Enrolling Participants,” page 119](#)

Linking a Benefit Program and Plan Type to Rate and Calculation Rules

Access the Cost page.

Cost page

Cost

Use this group box to identify the rate and calculation rules for each benefit program and option combination.

Cost Type

Identifies the cost type for this plan type and benefit option combination. For Base Benefits, the value will always be *Price*. The system calculates deductions for employees who select this option according to the deduction code linked to this benefit option.

For PeopleSoft Benefits Administration, the value can be *Price* or *Credit*. When you define a Cost Type as a *Credit*, you must enter the appropriate earnings code. Use the earnings code to tell the system how to calculate the flexible credit earnings for a participant. Use a different earnings code for each benefit plan type within a benefit program. The system assigns the frequency of the additional pay based on the deduction code that you identify for this benefit option.

Cost ID	When you enter a new Cost row, this value is assigned automatically by the system and cannot be updated.
Rate Type	Identifies the type of rate (flat amount, age-graded, etc.) associated with this plan type and benefit option combination.
Rate TblID (rate table identification)	Identifies which specific rate table is linked with this plan type and benefit option combination. You need the identification number because you may have established multiple tables for a particular rate type. Only plan types 01 through 3X can use rates.
Earn Code	Applies only to credits. Identifies the earning code that might be tied to the plan type.
Calc TblID (calculation table identification)	Identifies the calculation rule linked to the plan type and benefit option combination.

Rate Availability by Plan Type

Plan Type	Flat Rate	Age-Graded	Service Rate	Percent of Salary
01	✓For PeopleSoft Benefit Administration only.	✓For PeopleSoft Benefit Administration only.	✓For PeopleSoft Benefit Administration only.	✓For PeopleSoft Benefit Administration only.
1X	✓yes	✓yes	✓yes	✓yes
2X	✓yes	✓yes	✓yes	✓yes
3X	✓yes	✓yes	✓yes	✓yes
4X–9X	Not Used	Not Used	Not Used	Not Used

For some plan types, you will need to specify the proper Calculation Rules Table Identification to ensure that the appropriate calculation rules are applied.

You don't have to indicate rates and calculation rules for *all* plan types. Certain rate types, on the other hand, *require* calculation rules. The following two tables provide additional information:

Rate and Calculation Rule Requirements by Plan Type

Plan Type	Rate Tables	Calculation Rules Table
01	Required	Dependent on rate type.

Plan Type	Rate Tables	Calculation Rules Table
1X	Required	Dependent on rate type (Flat rate no calculation rules are required; Others — required.
2X	Required	Same as above.
3X	Required	Same as above.
4X	No	Required
5X	No	Required (reserved for future use), but not applied during calculations.
6X	No	Not Used
7X	No	Not Used
8X	No	Not Used
9X	No	Not Used

Calculation Rule Requirements for Rate Types

Rate Type	Calculation Rules
Age Graded	Required
Flat Amount	NA
Salary %	Required
Service	Required

Setting Up Benefit Programs That Provide Benefits to Nonqualified Dependents

PeopleSoft Human Resources Base Benefits enables you to offer health and life benefits to your employees' domestic partners and other nonqualified dependents. You must define a specialized set of deduction rules, calculation rules, and age-graded rates. In addition, if you're planning on offering health benefits to nonqualified dependents, define one or more nonqualified dependent health plans. PeopleSoft delivers the following three health plan types for nonqualified dependents:

Plan Type	Description
15	NQ Medical (nonqualified medical)
16	NQ Dental (nonqualified dental)
17	NQ Vision (nonqualified vision)

If you're setting up a life plan for domestic partners and other nonqualified dependents, use a Dependent Life plan type.

Keep in mind that the IRS considers all of the benefits received by nonqualified dependents to be taxable income. The IRS will tax employees for the employer-paid portions of nonqualified health benefits, and it will also tax *all* of the benefits that nonqualified dependents receive from dependent life plans. In both cases, the system will perform imputed income calculations.

When you design a benefit program that enables employees to offer health and life benefits to domestic partners and other nonqualified dependents or beneficiaries, set up rows for nonqualified dependent health plan types—such as NQ Medical and NQ Vision—that complement the Medical and Vision plan types that are already present in your program. Your employees must elect (in an ordinary health plan type) to provide health coverage for themselves and their qualified dependents and a complimentary "NQ" health plan type to provide health coverage for their nonqualified dependents.

Note. If you are currently implementing PeopleSoft Benefits Administration, use the application's Cross-Plan Validation feature to set up the system to perform a validation check during the PeopleSoft Benefits Administration process that ensures that employees who attempt to enroll in an "NQ" health plan type are already enrolled in a regular health plan type.

See Also

Chapter 3, "Setting Up Core Human Resources Base Benefits Tables," Setting Up Deduction Codes, page 33

PeopleSoft 8.8 Benefits Administration PeopleBook, "Building Automated Benefit Programs," Setting Up Cross-Plan Validation

Cloning Benefit Programs, Eligibility Rules, or Event Rules

The Benefit Program Clone Utility enables you to identify a benefit program and make an exact copy of that program with a different effective date. You can give the duplicate program the same name as the original or rename it.

Page Used to Clone Benefit Programs, Eligibility Rules, or Event Rules

Page Name	Object Name	Navigation	Usage
Benefit Program Clone Utility - Prog. Clone Util. (program clone utility)	BN_CLONE	Set Up HRMS, Product Related, Base Benefits, Program Structure, Benefit Program Clone Utility	Create a copy of an existing benefit program. Give the duplicated program a new effective date and choose to give the program a new name or keep it the same. Create a copy of an existing eligibility or event rule for Benefits Administration.

Using the Cloning Utility

Access the Benefits Clone page.

Benefits Clone

*Object Type to Clone: Benefit Program

Copy From

Selected	Benefit Program	Description	Effective Date	Status
☐	B01	BAS Eligibility 1	01/01/1998	A
☐	B01	BAS Eligibility 1	01/01/1990	A
☐	B02	BAS Eligibility 2	01/01/1990	A
☐	B03	BAS Eligibility 3	01/01/1990	A

Copy To

Benefit Program: Effective Date:

*Program Type: Manual

Clone

Benefits Clone page

Object Type to Clone Select an option:

Benefit Program

Eligibility Rule (Benefits Administration only)

Event Rule (Benefits Administration only)

Selected

Select the check box for the object, benefit program, eligibility rule or event rule that you would like to clone.

Copy To

This group box defines the name of the new object that will be created. These fields vary, depending upon the type of object you're cloning.

CHAPTER 6

Setting Up Additional Human Resources Base Benefits Features

This chapter discusses how to:

- Set up Benefits Billing.
- Set up COBRA administration.
- Setup internal administrative contact information.
- Set up multiple jobs.
- Set up retroactive benefits and deductions.

Setting Up Benefits Billing

Benefits Billing enables you to bill employees and dependents directly for benefit plan elections instead of paying through the payroll deduction process. Benefits Billing can be used for both regular and COBRA benefits.

To set up Benefits Billing:

1. Set up the rules for billing on the Billing Parameter page.
You establish only one set of billing parameters for your entire system.
2. Set up the billing cycle using the Billing Calendar page.

This section discusses how to:

- Set up billing parameters.
- Set up payment due dates.

Pages Used to Set Up Benefits Billing

Page Name	Object Name	Navigation	Usage
Billing Parameter	BILL_PARMS	Set Up HRMS, Product Related, Base Benefits, Billing, Billing Parameters	Define billing parameters.
Billing Calendar	BILL_CALENDAR	Set Up HRMS, Product Related, Base Benefits, Billing, Define Calendar	Set up begin, end, and payment due dates for individual billing periods. Also control billing statement printing and enter comments that appear on statements printed during a particular billing period.

Setting Up Billing Parameters

Access the Billing Parameter page.

Billing Frequency Indicate how often to calculate billing amounts.

Days Due Enter the number of days after the billing period begin date that the payment is due. This value is used to determine the default payment due date on the Billing Calendar page.

Note. COBRA requirements mandate at least 30 days for COBRA billing.

Days to Overdue Enter the number of days past the payment due date that qualify a payment as overdue.

Setting Up Payment Due Dates

Access the Billing Calendar page.

Billing Period When you first access the page, you must enter a billing period code that identifies the billing period that you're setting up the calendar for. The code may be any unique four-character combination. We recommend *YYMM* as an identification code for monthly calendars.

Period Begin Date and Period End Date The system uses the period begin date and the Days Due value set on the Billing Parameter page to calculate default payment due dates for regular and COBRA Benefits Billing processes.

The system uses the period end date to evaluate effective dates. The period end date is also used as the posting date for billing charges.

Note. The system does not edit the billing frequency to ensure that it matches the begin and end dates.

Payment Due, COBRA Payment Due The system automatically sets Payment Due and COBRA Payment Due according to the Days Due values set in the Billing Parameters page

and the Period Begin Date that you've defined for this billing period. You can override the default dates if necessary.

Note. You cannot set a COBRA due date that is less than 30 days past the begin date.

Comment

(Optional.) Enter text to appear on all of the billing statements sent out for this billing period.

**Billing Calculation Run,
Billing Statements Printed**

Indicates current processing stage for this billing calendar.

Setting Up COBRA Administration

This section explains how to set up COBRA Administration.

Understanding COBRA Administration Set Up

COBRA (Consolidated Omnibus Budget Reconciliation Act) legislation requires employers to offer continued health coverage to employees and their dependents who lose coverage under certain conditions or events.

This section discusses how to:

- Activate COBRA.
- Link COBRA to your benefit packages.
- Identify COBRA eligible benefit plans.
- Establish coverage codes for COBRA.
- Define COBRA qualifying events.
- Identify COBRA events.
- Identify the COBRA Administrator.

Pages Used to Set Up COBRA Administration

Page Name	Object Name	Navigation	Usage
Event Rules	COBRA_EVENT_RULES1	Set Up HRMS, Product Related, Base Benefits, COBRA, Event Rules	Identify the events that result in the loss of health plan coverage for a qualified beneficiary.
COBRA Administrator - Administrator	COBRA_ADMINISTRATR	Set Up HRMS, Product Related, Base Benefits, COBRA, COBRA Administrator	Define the COBRA administrator's name and address. This information will print on COBRA notification, enrollment, and termination letters.

Activating COBRA

This section explains how to activate COBRA administration.

To activate COBRA:

1. Access the Installation Table - Product Specific page.
2. Select the COBRA Administration check box under the Benefits Functions group box.

Linking COBRA to Benefit Packages

To link COBRA to your benefit package, use the Benefit Program Table. On the Benefit Program Table, identify the following:

- The age at which a dependent is no longer considered a dependent.
- The age at which a dependent is no longer considered a student.
- Whether a disabled person is excluded from the age limits.
- Whether dependents are ineligible for regular benefits, if married.

You will also identify any extra charges that you want added to the cost of the benefits for both disabled and non-disabled persons.

See Also

Chapter 5, “Building Base Benefit Programs,” page 75

Identifying COBRA-Eligible Benefit Plans

To identify which benefit plans offered within a benefit program are eligible for COBRA administration, use the Benefit Program Table. When you design your benefit program, if you designate Health *Ix* and FSA *60* plan types as COBRA-qualified plan types, you must designate an Option Code for those plan types. The system uses the option codes for the enrollment of employees into COBRA benefit plans. This restriction only applies if you do not utilize PeopleSoft Benefits Administration.

In general, only medical and health plan types (plan types *Ix* and *6x*) are designated as COBRA-qualified plan types. However, PeopleSoft allows you to identify non-medical plan types as COBRA-qualified plans if your organization’s policy is to offer them to your employees as part of their COBRA coverage. You will need to modify the COBRA COBOL for plan types other than Medical *Ix* or FSA *6x* plan types.

For COBRA, medical coverage is a core benefit. COBRA administration defines non-core benefits such as dental and vision care benefits. If your benefits program combines core and non-core benefits, you may have to offer COBRA participants a core option that is not available to other active employees.

Currently, nonqualified medical, dental, and vision plans are not currently supported for COBRA coverage. You should not designate these plans as COBRA-qualified plans.

See Also

Chapter 5, “Building Base Benefit Programs,” page 75

Establishing Coverage Codes for COBRA

Coverage codes are created on the Coverage Code page. PeopleSoft has four coverage codes that work for COBRA Administration. You can add more codes as required by your organization, however, the coverage codes for non-qualified dependents are not for you use by COBRA Administration.

The COBRA Coverage Set field on the Coverage Code page is used COBRA during processing to determine the type of coverage to offer a participant. To indicate that a coverage code is to be used during COBRA processing, enter a two-digit code in the COBRA Coverage Set field.

Example:

Let's say you have the following coverage codes: 1 — Employee Only, 2 — Employee + Spouse, 3 — Employee + Dependents, 4 — Family, A — Employee Only, B — Employee + Spouse, C — Employee + Dependents, and D — Family. You want COBRA processing to only consider coverage codes A, B, C, and D as eligible codes and you have decided that CO will represent COBRA eligible coverage codes. You will enter *CO* in the COBRA Coverage Set field for coverage codes A, B, C, and D.

Defining COBRA-Qualifying Events

PeopleSoft delivers COBRA administration with the following qualifying events:

- Voluntary termination.
- Involuntary termination.
- Reduction of hours.
- Death of an employee.
- Divorce and legal separation.
- Loss of dependent status (due to marriage or arrival at the age limit for benefit coverage).
- Medicare eligibility.
- Retirement.

According to federal government guidelines, employees and spouses of employees who undergo voluntary or involuntary termination for “gross misconduct” are *not* eligible for COBRA coverage. We do not deliver COBRA Administration with the capability to differentiate between terminations for gross misconduct and other termination types, but you can set up Action Reason codes and add PeopleCode to have the system perform this function.

You should review the set of events provided, change them, and add new events as necessary based on the qualifying events that your organization recognizes. Then, for each valid event:

- Define when COBRA coverage begins and how long it will last.
- Define any grace periods.
- Define when the employee has to notify the organization of the event and when the organization has to notify the employee of COBRA benefits.
- Define the qualified beneficiaries for the event.
- Define the secondary event rules for the event.

If you want to set up additional COBRA Event Rule records for a particular COBRA Event Classification, insert a new row with a different Effective Date. The system will always use the record with the Effective Date that is closest to the current date.

You can set up COBRA Event Rule records with future effective dates. This allows you to have the definition of a COBRA Event Classification change on a predetermined date.

Determining COBRA Coverage Period

COBRA coverage begins the day following the last day of regular active coverage and generally extends for 18 or 36 months following a qualifying event. If an employee is terminated on the 15th, COBRA coverage begins on the 16th.

The determination of the COBRA period begin date is dependent on several factors. The first factor is whether or not the COBRA period includes alternative coverage. Alternative coverage is the grace period of continued active coverage beyond the date when an employee's active health coverage would normally terminate. Grace periods are provided either manually through Base Benefits or automatically with the PeopleSoft Benefits Administration system.

Regardless of whether the COBRA period includes the alternative coverage, the COBRA Coverage Begin Date is always set to the day following the last day of active coverage. It is the calculation of the COBRA Coverage End Date that is dependent on the inclusion or exclusion of alternative coverage.

In the case of disabled COBRA participants, however, regulations allow an extension up to 11 months past the original 18 months for termination of employment and reduction in work hours events. You can extend the coverage for disabled participants by completing the Additional Months if Disabled field on the Event Rules page.

The date on which COBRA coverage ends is defined as the COBRA period begin date + the number of Months of Coverage + any Additional Months if Disabled.

Providing Grace Periods

There may be situations where you want to provide "grace periods" for your employees that begin on the day following the last day of regular coverage. During these grace periods, your organization pays all or part of the employee benefits premiums. Extending the termination dates of an individual's health benefit plans past the COBRA-qualifying event date sets grace periods. You can do this manually or arrange for it to happen automatically through PeopleSoft Benefits Administration processes. To provide a grace period, select Include Alternative Coverage and specify when you want the COBRA period to actually begin, which will be the day after the grace period ends. The system includes grace periods in the COBRA coverage period. You can select to have COBRA begin on the day of the event, on the first day of the month after the event, or on the first day of the pay period after the event day.

If you do not want a grace period to be included in the COBRA period, do not select Include Alternate Coverage. The COBRA period begin date will be the same and COBRA coverage will start on the day after the grace period ends. This means that if your organization paid for all or part of the employee premiums during a grace period, the COBRA period does not begin until *after* the conclusion of alternative coverage. The length of continued coverage from the qualifying event is the length of the grace period plus 18 months of COBRA continuation coverage.

The system calculates the COBRA Coverage End Date according to a formula derived from the parameters defined in the COBRA Event Rules.

Here are examples showing how COBRA can calculate COBRA coverage end dates for an employee who experiences a COBRA qualifying event on March 15, has a pay period on March 22, whose last day of active coverage is on June 30, and is allowed 18 months of COBRA coverage.

Last Day of Active Coverage	Include Alternative Coverage	COBRA Period Begins Code	COBRA Period Begin Date	COBRA Coverage Begin Date	COBRA Coverage End Date
6/30	N		7/1	7/1	12/31
6/30	Y	Event Date	3/15	7/1	9/14
6/30	Y	Month After	4/1	7/1	9/30
6/30	Y	Pay Period	3/22	7/1	9/21

The Coverage End Date will always be equivalent to the COBRA period begin date plus the Months Of Coverage for each plan type, with two exceptions:

- For employees and spouses, COBRA coverage will end *before* the scheduled Coverage End Date on the date that the employee or spouse turns 65 and becomes eligible for Medicare.
- For dependents of employees who become eligible for Medicare, the COBRA Coverage End Date will be the latter of the COBRA period begin date or the employee's Medicare entitlement date plus 36 months.

Setting Rules For Secondary COBRA Events

Secondary COBRA-qualifying events are events that extend the amount of time a participant is eligible for COBRA coverage.

An event must fulfill the following basic qualifications in order for it to qualify as a COBRA secondary event:

- The initial COBRA event must be a COBRA event classification associated with a change to an employee's job status, such as a reduction in hours, termination, or retirement.
- The employee and dependent must currently be participating in an active initial COBRA event and have COBRA coverage.
- The secondary event must be one of the COBRA event classifications that involves loss of coverage for the employee's dependent, such as divorce, marriage of dependent, overage dependent, death of employee, or a Medicare entitlement.

For example, suppose a married employee is terminated. The employee and his spouse will receive 18 months of COBRA coverage after the termination. If the employee and spouse divorce, the divorce would be considered a secondary event for the ex-spouse. If the divorce occurred *before* the termination, the termination would *not* be a secondary event for the ex-spouse.

The classification of the event determines the amount of time for which coverage is extended and the method by which coverage is extended. In the previous example, the secondary event would cause the coverage of the ex-spouse to be extended from 18 to 36 months from the coverage begin date of the initial event. In general, even with secondary events, a dependent's coverage cannot exceed 36 months.

The exception would be a case where the secondary event is a Medicare entitlement. When a qualified COBRA beneficiary turns 65, and is Medicare entitled, COBRA coverage ceases. In this case, the system adds the 36 months to the COBRA event date (the Medicare entitled date), thereby extending the dependent's COBRA coverage past 36 months.

COBRA-Qualified Beneficiary

The following chart illustrates how the Benefit Lost Level and COBRA-Qualified Beneficiary relate to one another. For each COBRA Event Classification, it displays the Benefit Lost Level and COBRA-Qualified Beneficiaries typically associated with that event.

COBRA Event Classification	Benefit Lost Level	COBRA-Qualified Beneficiaries
TER, RET, RED, MIL	Employee	Employee, Spouse, Son, Daughter
DEA, MED	Employee	Spouse, Son, Daughter
OVG, DEP	Dependent	Son, Daughter
DIV	Dependent	Ex-spouse

See Also

PeopleSoft 8.8 Benefits Administration PeopleBook, “Creating Event Rules”

Identifying COBRA Events

Access the Event Rules page.

Event Rules

COBRA Event Classification: DEA

COBRA Event Rules Find | View All First < 1 of 1 Last

*Effective Date: 01/01/1980  Status: Active  

*Description: Death Short Description: Death

Response Days Allowed: 60

Days to Notify of Event: 30

Payment Grace Days: 45

☐ Manual Events Allowed

☒ Waive COBRA Surcharge

COBRA Period Determination

Months of Coverage: 36 ☐ Include Alternative Coverage

Additional Months if Disabled: COBRA Period Begins: On the Event Date 

☐ Use BenAdmin Event Rules

Secondary Event Rules

Secondary Event Role: Succeeding Second Event 

Second Event Additional Months: 36

Secondary Event Add Mode: E 

Benefit Lost Level: Employee 

COBRA Qualified Dependents

Relationship to Employee		
Daughter 		
Son 		
Spouse 		

Event Rules page

COBRA Event Rules

Effective Date	Enter or select the date on which this COBRA event goes into effect. The system always uses the record with the effective date that is closest to but not past the current date.
Status	Select whether this COBRA event is <i>Active</i> or <i>Inactive</i> .
Description	Enter a description of the COBRA event using 30 characters.
Short Description	Enter a brief description of the COBRA event using 10 characters.
Response Days Allowed	Specifies the maximum number of days that a beneficiary has to elect coverage from the date of notification. COBRA eligibility expires after the response period.
Days to Notify of Event	Identifies the number of days an employee or dependent has to notify the organization following a qualifying COBRA event.
Payment Grace Days	Enter the number of payment grace days employees will be given to submit a payment after they send in an election.
Manual Events Allowed	Select this check box if you want to allow manual entry of the event.

Waive COBRA Surcharge Select this check box if, for this event classification, you want the system to disregard the COBRA surcharge percentages defined in the Benefit Program Table.

COBRA Period Determination

Months of Coverage Identifies how long coverage will extend for a particular qualifying event. COBRA coverage generally extends for 18 or 36 months following a qualifying event.

Additional Months if Disabled Enter the extension for disabled participants. Regulations allow an extension up to 11 months past the original 18 months for termination of employment and reduction in work hours events for disabled participants.

Include Alternate Coverage Select this check box to set up a grace period.

COBRA Period Begins Select a value to define when COBRA coverage begins. Choose from the following valid values:

On the Event Date: The COBRA period begin date will be the same as the day of the event. COBRA coverage actually begins the day after the event date or the day after the grace period ends.

On Month-Begin After Event: The COBRA begin date is on the first day of the month after the event.

On PayPeriod Begin After Event: The COBRA begin date is on the first day of the pay period after the event day.

Secondary Event Rules

Secondary Event Role Indicates whether or not the displayed COBRA event classification can be considered a secondary event. You can choose from the following valid values:

Succeeding Second Event (S): This indicates that the COBRA event classification is a secondary event.

Preceding Initial Event (P): If this field has a value of *P*, then the other two Secondary Event Rules fields will be unavailable for data entry.

Second Event Additional Months If Secondary Event Role is selected, the Second Event Additional Months field defines the number of months the original COBRA coverage will be extended.

Secondary Event Add Mode Defines whether the system adds Second Event Additional Months to the original coverage begin date of the initial event or to the COBRA event date of the secondary event.

In the event classifications that we deliver, the Death, Divorce, Married Dependent, and Overage Dependent events have a Second Event Add Mode value of *E* (Extended) while the Medicare Entitlement event has a Second Event Add Mode value of *A* (Added).

Note. For the *Divorce* COBRA Event Classification, the sole-defined COBRA qualified beneficiary is *X* (Ex-Spouse).

Benefit Lost Level

Define whether the COBRA event affects the employee only, the dependent only, or both. You can choose from the following valid values: *Employee*, *Dependent* (a COBRA-qualified beneficiary), or *neither*.

Identifying the COBRA Administrator

Identify your COBRA administrative personnel using the Benefits Administrative Contacts page discussed in the following section. Once you have entered this information, you can reference these COBRA administrators within each Benefit Program. This is the contact information (name and address) which will be included in printed COBRA notification letters.

Setting Up Internal Administrative Contact Information

This section explains how to set up internal administrative contact information.

Understanding Internal Administrative Contact Information

The internal administrative contact component is similar to the Vendor component, and is used to record internal contacts for HIPAA and COBRA functions. This internal contact structure enables you to identify a single contact person once, and then provides flexibility for you to reference that contact multiple times throughout the Manage Base Benefits system.

For HIPAA, the internal administrative contact component is used to record the HIPAA Administrator that must be included on all printed HIPAA certificates. The COBRA function uses this component to populate COBRA notification letters.

The contacts that are entered on the Benefits Administrative Contacts page can then be referenced on the Benefits Plan Table and the Benefit Program Definition. Note that while only HIPAA and COBRA currently utilize these contacts, they can actually be used for all benefit plan types.

Note. HIPAA reports BEN022 and BEN023 will now expect to find a HIPAA administrative contact printed on all certificates.

Page Used to Setup Internal Administrative Contact Information

Page Name	Object Name	Navigation	Usage
Benef Administrative Contacts	BENEF_ADM_CONTACTS	Set Up HRMS, Product Related, Base Benefits, Plans and Providers, Administrative Contacts	Record internal contacts for HIPAA and COBRA functions.

Setting Up Internal Administrative Contact Information

Access the Benefits Administrative Contacts page.

Benef Administrative Contacts

Benefits Contact ID: 1 ***Contact Description:**

Scroll Area

Find | View All First 1 of 1 Last

***Effective Date:** 11/15/2002 ***Effective Status:** Active

***Contact Name:**

Business Title:

Email Address:

Country: United States

Address:

1993 Corn Street
Turnabout, CA 94577
USA

[Edit Address](#)

Phone:

Benefits Administrative Contacts page

Benefits Contact ID	Identifies the individual contact, and assigns the next available contact ID.
Contact Description	This is an alternative contact search description.
Contact Name	Identifies the name of the internal contact. This contact can be a person, a department, or another name. The contact name is unlimited.

Setting Up Multiple Jobs

This section explains how to set up multiple jobs.

Understanding Multiple Jobs

Many organizations have employees that work in more than one job at the same time. The system needs to know how to process these employees with more than one job. Rules need to be created to answer questions such as:

- Which jobs should contribute salary information for calculating deductions that are based on the employee's earnings?
- Which jobs should provide paygroup information, hire date, and termination date?

Page Used to Set Up Multiple Jobs

Page Name	Object Name	Navigation	Usage
Multiple-Job Optns (multiple job options)	BAS_MJ_OPTIONS	Set Up HRMS, Product Related, Base Benefits, Multiple Job Management, Multiple Jobs Options	Define employee-level multiple jobs options used automatically whenever a new job is entered into the system, or whenever an existing job is rehired or terminated through the Administer Workforce pages.

Setting Up Rules for Multiple Jobs

Access the Multiple-Job Optns page.

Multiple-Job Optns

When a Job is Hired, Re-Hired or Added

Eligibility and Deductions

*Eligibility: Include this Job

*Deductions: Include this Job

If assigned to an existing Benefit Record

*Assign Primary Job: No Change to Primary Job

When a Job Terminates

Eligibility and Deductions

*Eligibility: Include this Job

*Deductions: Exclude this Job

If the Primary Job terminates

*Re-Assign Primary Job: Lowest Active Job

Explode activity triggers to all Benefit Records

☒ Job Triggers

☒ Passive Service Triggers

☒ Multi-Job Triggers

Workflow for Job Actions

Customize | Find | View 100 | First 1-2 of 210 Last

Action	Reason Code	Effective Date	Description	Notify Benefits Administrator
ADD	CON	01/01/1900	Consultant	☐
ADD	EBM	01/01/1900	Elected Board Member	☐

Multiple-Jobs Optns page

When a Job is Hired, Re-Hired or Added

Eligibility and Deductions

Set default rules for whether new concurrent jobs are included or excluded during deduction processing and for Benefits Administration users to determine benefit eligibility.

If assigned to an existing Benefit Record

If an employee is hired into a concurrent job and the job is linked to an existing benefit record number, indicate if the new job should be designated as the primary job.

When a Job Terminates

Eligibility and Deductions	Set default rules for whether terminated jobs should continue to contribute information during deduction processing and for Benefits Administration users to determine benefit eligibility.
If the Primary Job terminates	Indicate how to reassign the primary job designation if the terminating job is the primary job. <i>No Change:</i> Don't reassign the primary job designation. <i>Lowest Active Job:</i> Reassign the primary job designation to the lowest active employee record number. If no jobs are active, the job with the lowest employee record number is designated as the primary job. <i>Highest Active Job:</i> Reassign the primary job designation to the highest active employee record number. If no jobs are active, the job with the highest employee record number is designated as the primary job.

Explode activity triggers to all Benefit Records

Job Triggers, Passive Service Triggers and Multi-Job Triggers (multiple job triggers)	For Benefits Administration Users only. Select these options when you have an eligibility rule that applies to all benefit programs and that crosses benefit record numbers. For example, suppose that an employee holds four jobs, is enrolled in two benefit programs, and has two benefit records. If the employee experiences a job data change for one job, and eligibility rules cross benefit records, an event must be created for all benefit records. A change to a job in benefit record A might affect the employee's eligibility for benefits in benefit record B if any eligibility rule in the benefit program for benefit record B contains a Grouping Method of <i>All Flagged</i>.

Workflow for Job Actions

While the multiple jobs rules are automatically applied for hires, rehires and terminations, you can automatically notify a benefits administrator to review the situation for any job action.

For example, a change to the full-time/part-time status of a concurrent job might affect the determination of the primary job.

To configure this function:

1. Locate the action/action reason combinations that should generate a workflow notification,
2. Select the Notify Benefits Administrator check box.

Whenever a job action is entered into the system for one of these combinations, a worklist entry is generated for the benefits administrator.

Selecting the worklist entry accesses the Administrator to the Primary Jobs Maintenance page for that employee.

Setting Up Retroactive Benefits and Deductions

This section discusses how to:

- Activate retroactive benefits and deductions.
- Define retroactive benefit and deduction programs.
- Defining the parameters for mass retroactive benefit and deduction requests.

To set up retroactive benefits and deductions, you:

1. Activate retroactive benefits and deductions on the Installation page.
2. Define retroactive benefits and deductions programs.
3. If you are creating mass requests, define the retroactive benefit deduction selection criteria.

The Retroactive Benefit and Deduction Mass Request feature gives you the ability to create a large number of requests via a batch process. This is necessary when you retroactively update system-level pages that affect multiple employees. Changes to the following system-level pages could generate mass retroactive benefit and deduction requests:

- Deduction Table.
- General Deduction Table.
- Most benefit plan design tables (such as the Life and AD/D Plan Table).
- Calculation Rules Table.
- All rate tables.

Note. Because the Retroactive Benefit and Deduction feature involves PeopleSoft Payroll processes in the calculation of retroactive benefits and deductions and the loading of retroactive benefit and deduction totals to payroll, it is unavailable to those users who do not currently implement PeopleSoft Payroll.

Deductions based on *earnings* (such as garnishments or savings plan deductions) are *not* included in the retroactive benefits and deductions process. They are handled as part of the PeopleSoft Payroll adjustment process.

Pages Used to Define Retroactive Benefit and Deduction Programs and Mass Requests

Page Name	Object Name	Navigation	Usage
Retro Ben/Ded Program (retroactive benefit/deduction program)	RETRODED_PGM_TBL	Set Up HRMS, Product Related, North American Payroll, Retroactive Process, Retroactive Ben/Ded Program	Define high-level information for your organization's retroactive benefit and deduction programs.
Retro Ben/Ded Mass Request (retroactive benefit/deduction mass request)	RETRODED_MASS_RQST	Set Up HRMS, Product Related, North American Payroll, Retroactive Process, Retro Ben/Ded Mass Request	Set up your mass retroactive benefit and deduction programs by assigning them a Mass Retro Request ID and by defining detailed information. To set up a new mass retroactive deduction and benefit program, enter a Mass Retro Request ID to open the page. The system uses the Mass Retro Request ID to generate mass retroactive benefit and deduction requests and to calculate the retroactive benefit and deduction earnings based on those requests.

Activating Retroactive Benefits and Deductions

You must activate Retroactive Benefits/Deduction before using the Retroactive Benefit and Deduction facility.

To activate Retroactive Benefits and Deductions:

1. Access the Installation Table - Product Specific page.
2. Select the Retroactive Benefit and Deduction check box in the Benefits Functions group box.

Defining Retroactive Benefit and Deduction Programs

Access the Retro Ben/Ded Pgm (retroactive benefit/deduction program) page.

Retro Ben/Ded Pgm

Retro Program ID: BRD

Program Definition Find | View All First 1 of 1 Last

*Effective Date: 01/01/1996

*Status: Inactive

*Retro Program Type: Individual

*Description: 1996 BN Individual Retro Pgm

Short Description: 96 BN Ind

Refunds Paysheet Processing

☐ Off Cycle ☐ Sep Check

Benefit/General Deductions Customize | Find | View All First 1-8 of 51 Last

Deductions Mass Retro Override

Plan Type	Company	Benefit Program	Benefit Plan	Covrg Code	Ded Code	Ded Class	Base Flag	Job Flag		
Medical		B46	BP0202							
Medical		B46	BP0203							
Dental		B46	BP0152							
Vision		B46	BP0235							
Life		B46								
Supp Life		B46								
Sick		B46	BP0216							
Vacation		B46	BP0232							

Find | View All First 1 of 1 Last

Retro Ben/Ded Pgm page

Program Definition

Retro Program ID

When you first select this page from the menu, enter a new or current Retro Program ID. This ID links the retroactive benefit and deduction requests to a specific retroactive benefit and deduction program, which helps the system identify which benefits or deductions are eligible for retroactive processing.

Retro Program Type (retroactive program type)

The system assigns each retroactive benefit and deduction program a Retro Program Type of *Individual* or *Mass*.

Individual programs apply to all of the employees and companies in your database; therefore, define only one individual program for that database. *Mass* programs apply to different groups of employees; therefore, you can define multiple mass programs with different Retro Program IDs for the same database.

Warning! If you change the Retro Program ID after retroactive benefit and deduction processing begins, improper retroactive benefit and deduction calculations will result.

Refunds Paysheet Processing

Off Cycle

This check box enables you to manage your one-time deduction refunds. In the event of a refund, the Off-Cycle field controls whether or not the retroactive benefit and deduction calculation program will create new one-time deduction refunds as an off-cycle deduction or an on-cycle deduction.

Off-cycle or separate check processing of retroactive benefits and deductions generally is used only when you are processing retroactive pay in the same cycle as regular pay. If you select Off-Cycle the system treats each retroactive deduction associated with this program as an off-cycle one-time deduction refund, and delivers the refunds to your employees in separate checks from their regular paychecks.

If you do not select the Off-Cycle the system treats the retroactive deductions associated with the program as on-cycle deductions and combines employee refunds with their regular paychecks.

Note. When you load your retroactive benefits or deductions to employee paysheets, the On-or Off-Cycle selection for the Retro Ben/Ded Payroll Load run control must match the On- or Off-Cycle selection for this field.

Sep Check (separate check)

Select to indicate that the one-time deduction refund records associated with the retroactive benefit or deduction will be loaded to a separate check on the employee paysheets.

Deductions Tab

Base Flag

Select to have the system process retroactive benefits or deductions when the request is triggered by a change in the Annual Benefits Base Rate.

Job Flag

Select to have the system process retroactive benefits or deductions for individual retroactive benefit and deduction programs when the request is triggered by a change in the Compensation Rate or any of its related fields.

Mass Retro Override Tab

If you are setting up a Mass retroactive benefit and deduction program, fill in the Start Date Ovrdr for Mass Retro (start date override for mass retroactive benefit/deduction) and End Date Ovrdr for Mass Retro (end date override for mass retroactive benefit/deduction) fields to override the process start date and process end date for the requests that are created.

Refunds Versus Deductions

The system only loads refunds to employee paysheets. In situations where the retroactive benefit and deduction process finds that employees owe additional payments, the system collects these funds through the PeopleSoft Payroll arrears adjustment process. The system drops all employee retroactive benefits and deductions into the arrears balance via arrears adjustments. If there is enough money, the system will collect the amounts during the current payroll run, according to the arrears rules that you defined for that deduction.

See Also

Chapter 17, “Processing Retroactive Benefits and Deductions,” page 251

Chapter 3, “Setting Up Core Human Resources Base Benefits Tables,” Setting Up Deduction Codes, page 33

Defining the Parameters for Mass Retroactive Benefit and Deduction Requests

Access the Retro Mass Request page.

Retro Mass Request page

Description

Enter a description that explains the purpose of this mass retroactive benefit and deduction ID.

Comments

Describe the need for the particular mass retroactive benefit and deduction program that you are creating.

Process Start Dt (process start date) and Process End Dt (process end date)

Define the period during which the mass request calculates retroactive benefits or deductions. The Process End Dt is automatically set to today's date when a new Mass Request ID is created. The process start date becomes the effective date of the generated requests, except for cases where the selected employee begins to meet the criteria at some point after the start date, in which case that latter date is used as the effective date of the request.

Retro Program ID (retroactive benefit/deduction program ID)

Select an appropriate ID from the list. Only those retroactive benefit and deduction programs defined for *Mass* processing will appear.

Selection Start Dt (selection start date) Selection End Dt (selection end date)

During the processing period set up by the Process Start and End Dates, the system searches employee records *active* between the Selection Start and Selection End box Dates for the information specified in the Selection Criteria group box.

Delete Request Use this check box to stop the mass retro benefit and deduction process if you have not yet run the calculation process for your Mass Retro ID. When you run the Mass Retro batch process, it deletes every Mass Request ID and related request that has this check box selected and has not yet been through the calculation process.

Hire Date (Optional.) Use to select employees that have a hire date on the Employment Table that is less than or equal to this date. If this field is blank, the system creates requests for employees that have a hire date less than or equal to the Selection End Dt.

Service Date Functions the same way as the Hire Date field except that it refers back to the Employment Table's Service Date field.

Selection Criteria

The fields in this group box define the types of employees that the Mass Retro batch process looks for. You can set up multiple rows of selection criteria for your mass retroactive benefit and deduction program to open up a new one.

Company Use this required field to indicate the company whose employees you want to process. You can have multiple rows of selection criteria with the same company if you want to change the values of the other fields.

Mass Seq# (mass sequence number) Each time that you enter a new row of selection criteria, the *Mass Seq#* will be incremented forward by one.

Department, Job Code, and Location Code These fields are linked to the Business Unit field.

Business Unit You must define a business unit before entering Department, Job Code, and Location Code values.

Reg/Temp (regular/temporary), (Optional) Specify additional selection criteria using valid values from the list boxes.

Full/Part Time, Employee Type, Employee Class, and Employee Status

Enter the other selection criteria as necessary. Values for all selection criteria fields that are blank will be selected by the system. If you want to use more than one of the available values of a particular field in your selection request, enter an additional row.

The three Elig Cal Days (eligible calculation days) fields are linked to the Job Code, Location Code, and Union Code fields. They each enable you to create selection requests for employees who have been assigned a specific job code, location or union code for a specific number of days. For each Elig Cal Days field, the system takes a look at the Effective Date of the selected job record.

CHAPTER 7

Entering Dependent and Beneficiary Information

This chapter provides an overview of dependent and beneficiary information and discusses how to:

- Set up dependent roles.
- Enter dependents and beneficiary information.
- Enter dependent and beneficiary comments.
- (USF) Designate beneficiaries for a final check.
- Terminate dependent enrollments or beneficiary status.
- Enter court orders and spousal waivers.

Understanding Dependent and Beneficiary Information

Accurate dependent and beneficiary information—name, address, birth date, gender, and relationship—helps ensure that benefit claims are quickly and correctly processed.

By setting up dependent/beneficiary data, you can:

- Simplify benefit enrollment for dependents and beneficiaries.
- Review data and print reports.

Additionally, requirements such as a Qualified Medical Child Support Order (QMCSO) and Qualified Domestic Relations Order (QDRO) mandate that employees provide benefits to dependents and beneficiaries. When you enter a court order, the system checks to see if a court order is tied to an employee record. If the system finds a court order, it checks to see if any changes are allowed to the benefit enrollments. If changes are not allowed, then a warning appears.

When you set up dependent/beneficiary data, you need an employee identification number. So you need to enter employee administration data—personal information, compensation allowances, and job data—first.

You can view basic human resources information for employees by using personnel administration components such as Personal Data and Job Data in PeopleSoft Human Resources or by viewing the Employee Data Summary in Base Benefits. Employees can review, update and add their own dependent and beneficiary information using the PeopleSoft eBenefits application pages.

See Also

PeopleSoft 8.8 Human Resources PeopleBook: Administer Workforce, “(USF) Hiring Employees”

Setting Up Dependent Roles

You can define the relationships—for example, son, daughter, grandmother, grandfather, nephew, or niece—that qualify as dependents according to your organization’s rules. If you define relationships, you cannot enter dependents whose relationships are not defined. (So if you had not defined *grandmother* as an allowable dependent type, you couldn’t enter an employee’s grandmother as a dependent.) This setup is optional; if you don’t define relationships, the system doesn’t restrict who can be a legal dependent.

Beneficiary relationships are not tracked, because they do not have the same legal ramifications as dependents.

Page Used to Set Up Dependent Roles

Page Name	Object Name	Navigation	Usage
Dep. Relationship (dependent relationship)	DEPBEN_TYPE_TBL	Set Up HRMS, Product Related, Base Benefits, Dependent Relationship Table	Tie relationships (spouse, son, daughter, and so on) to benefit roles.

Defining Dependent Roles

Access the Dep. Relationship page.

Dep. Relationship

Relationship to Employee: Daughter

Dependent Types

Customize | Find | View All |  First 1 of 1 Last

*Effective Date	*Status		
01/01/1990 	Active 		

Dep. Relationship page

- Relationship to Employee

The relationship that you selected to access the page.
- Effective Date

Enter a date on which the dependent status of this relationship goes into effect.
- Status

If the rule is *Inactive*, this relationship is no longer considered a valid dependent.

Entering Dependents and Beneficiary Information

Dependent and beneficiary information is entered in the Dependent Data component of PeopleSoft Human Resources Administer Workforce and is fully documented in the *PeopleSoft Human Resources PeopleBook: Administer Workforce* .

See Also

PeopleSoft 8.8 Human Resources PeopleBook: Administer Workforce, “Entering Additional Data in Human Resources Records”

Page Used to Enter Dependent and Beneficiary Information

Page Name	Object Name	Navigation	Usage
Federal Medicare Flags	BN_DEPBEN_EFFDT	- Benefits, Employee/Dependent Information, Update Dependent/Beneficiary - Click the Federal Medical Flags tab.	(USF) Select federal Medicare flags and types if required.

(USF) Entering Medicare Flags

Access the Federal Medicare Flags page.

The screenshot displays the 'Federal Medicare Indicators' page. At the top, there are tabs for 'Name', 'Address', 'Personal Profile', and 'Federal Medicare Flags'. Below the tabs, the employee's name 'Santos, Emma' and 'Employee' status are shown, along with 'EmplID: B-BU140'. The main section is titled 'Federal Medicare Indicators' and contains a sub-section 'Dependent/Beneficiaries'. This sub-section has a search bar with 'Find | View All' and pagination 'First 1 of 1 Last'. Below this, there are fields for 'Dependent/Beneficiary Name', 'ID: 01', and 'Relationship to Employee:'. A 'Medicare Indicators' section follows, with a date field for '*Effective Date' set to '11/15/2002' and two checkboxes: 'Medicare A Indicator' and 'Medicare B Indicator'. The page also includes navigation buttons like '+', '-', 'Find', 'View All', 'First', 'Last', and '1 of 1'.

Federal Medical Flags page

Medicare A Indicator and **Medicare B Indicator** Select if the dependent is enrolled in Medicare A or Medicare B.

Entering Dependent and Beneficiary Comments

Comments you make about dependents and beneficiaries are for your use only; they are not used by the system.

Page Used to Enter Dependent and Beneficiary Comments

Page Name	Object Name	Navigation	Usage
Benefit Comments	BENEFIT_COMMENTS	Benefits, Employee/Dependent Information, Record Dep/Ben Comments	Enter notes about a dependent or beneficiary.

Recording Dependent/Beneficiary Comments

Access the Benefit Comments page.

Action Date Enter the date on which the comment becomes or became effective.

Comments By Enter your name or the name of the person providing the information.

(USF) Designating Beneficiaries for a Final Check

You can designate dependents or beneficiaries to receive an employee's final check in the event that the employee dies. This page is used for informational purposes only; the system does not use the data entered on this page for benefits processing.

Page Used to Designate Beneficiaries for a Final Check

Page Name	Object Name	Navigation	Usage
Final Check	GVT_FIN_CHK_BEN	Benefits, Employee/Dependent Information, Assign Final Check Beneficiary	Specify dependents or beneficiaries to receive an employee's final check.

Specifying Beneficiaries for a Final Check

Access the Final Check page.

Final Check

Santos, Antonio Employee **EmplID:** KU0010 **Empl Rcd#:** 0

Final Check Beneficiary Data Find | View All First 1 of 1 Last

***Effective Date:** 11/15/2002

Benefit Information Find | View All First 1-2 of 2 Last

Dependent/Beneficiary ID	Percent of Benefit	Contingent
03 Santos, Sean		☐
01 Santos, Megan		☐

Total:

Final Check page

Percent of Benefit and Flat Amount

Enter a flat amount or percentage for the beneficiary to receive from the final paycheck.

The total percentage for all beneficiaries should equal 100, unless you have contingent beneficiaries. The sum of the flat amounts cannot be greater than the paycheck.

Excess

If flat amounts are used, select to designate a beneficiary to receive any excess funds.

Contingent

Select if this dependent or beneficiary is not a primary beneficiary.

Amounts attributed to contingent beneficiaries must also add up to 100 percent.

Terminating Dependent Enrollments or Beneficiary Status

Remember that you enroll dependents and assign beneficiaries when you enroll employees. To terminate a dependent enrollment or beneficiary status, you must enter a row of data with the termination date (just as you do with employees). You make these changes on the Benefit Detail page for the benefit in question, such as Life & AD/D Benefits. You do not make the changes on the Dependent/Beneficiary Data page.

If you try to delete dependent/beneficiary records on benefit detail pages that have court orders applied to them, the system informs you that the dependent or beneficiary has a court order that provides a legal right to benefit coverage.

Warning! If you delete dependent/beneficiary data using the Dependent/Beneficiary Data page, you'll destroy history. Once you change enrollment data, it won't matter that the dependent or beneficiary data is available on the Dependent/Beneficiary Data page. In fact, it must remain to provide correct historical information.

Entering Court Orders and Spousal Waivers

Spouses, ex-spouses, and children of employees may have court orders that provide them with a legal right to benefit coverage from those employees. In addition, certain benefit plans may require that a spouse have a required minimum coverage amount.

Court orders are entered on the Dependent/Beneficiary Riders page, and minimal spousal amounts are entered on the Benefit Plan Table.

To track court-ordered benefits, print the Court Ordered Coverage Audit report.

See Also

Chapter 3, “Setting Up Core Human Resources Base Benefits Tables,” Setting Up Deduction Codes, page 33

CHAPTER 8

Enrolling Participants

This chapter describes how to:

- Review employee eligibility.
- Enroll participants in benefit programs and plans.
- (USF) Enroll employees in benefit programs and plans through PAR (personnel action request).
- (USF) Assign FEGLI benefits.
- (USF) Enroll employees in TSP Agency Automatic Contribution plan.
- Terminating dependent enrollment or beneficiary status.

See Also

PeopleSoft 8.8 Benefits Administration PeopleBook, “Working With PeopleSoft Benefits Administration”

Reviewing Employee Eligibility

Before you can enroll a participant, your Human Resources department must set up personnel administration data: personal information, compensation allowances, and job data.

Pages Used to Review Employee Eligibility

Page Name	Object Name	Navigation	Usage
Employee Data Summ (employee data summary)	EMPLOYEE_SUMMARY1	• Benefits, Employee/Dependent Information, Review HR/Job/Payroll Data • Benefits, Employee/Dependent Information, Review HR/Job/Payroll Data	View the personnel administration data.

Viewing Personnel Administration Data

Access the Employee Data Summ page.

Employee Data Summ			
Santos, Antonio		Employee	EmplID: KU0010 Empl Rcd#: 0
Employee Summary Data			
Employee Status:	Active		
Benefits Employee Status:	Active		
Full/Part Time:	Full-Time		
Regular/Temporary:	Regular		
Standard Hours:	40.00		
Work Period:	Weekly		
Pay Group:	US Weekly		
Company:	Global Business Institute		
Employee Type:	Hourly		
Business Unit:	US006	GBI BU for US006	
Job Code:	170005	Assistant-Administrative	
Supervisor Level:			
Department:	10000	Human Resources	
Location Code:	KUNY00	Corporation Headquarters	
Annual Benefits Base Rate:			
National ID			
Country:	USA	NID Type:	PR SSN National ID 578-29-0482
Gender:	Male		
Marital Status:	Married		

Employee Data Summ page (1 of 2)

Significant Dates			
Hire Date:	09/12/1997	Service Date:	09/12/1997
Company Seniority Date:	09/12/1997	Rehire Date:	
Termination Date:		Date of Birth:	08/09/1972
Marital Status Date:	09/12/1997	Date of Death:	

Employee Data Summ page (2 of 2)

Annual Benefits Base Rate This field is blank if your organization uses a benefits base different from regular pay.

Set up the annual benefits base rate in the Compensation page of the Job Data Component, in the Annual Benefits Base Rate field.

See Also

PeopleSoft 8.8 Human Resources PeopleBook: Administer Workforce, "Hiring Your Workforce"

Enrolling Participants in Benefit Programs and Plans

Using the Base Benefits business process to enroll participants consists of two parts:

1. Enroll a participant in a benefit program.

Initially, an employee's benefit program assignment is assigned to the employee based on his or her employee pay group, but you can override this assignment at the employee level. Verify that the employee is enrolled in the correct benefit program, because you can only enroll participants in benefit plans that are associated with their assigned benefit program.

2. Using individual benefit pages, enroll the participant in all appropriate benefit plans within the benefit program.

When you enroll employees in health, life, savings, FSA, and Canadian pension benefit plans, you also enroll dependents and assign beneficiaries.

Note. You should set up that data *before* you start enrollments. That way, for each dependent enrollment and beneficiary assignment, you can prompt for the data once rather than enter it several times.

See Also

Chapter 4, "Setting Up Benefit Plans," page 45

Pages Used to Enroll Participants in Benefit Programs and Plans

Page Name	Object Name	Navigation	Usage
Ben. Prog. Partic. (Benefit Program Participation)	BEN_PROG_PARTICPTN	Benefits, Enroll In Benefits, Assign to Benefit Program	Enroll the employee in the appropriate benefit program.
Health Benefits Elections	HEALTH_BENEFITS1	Benefits, Enroll In Benefits, Health Benefits	Enroll employees and dependents in health plan types: medical, dental, and vision.
Life/ADD Elections	LIFE_ADD_BENEF1	Benefits, Enroll In Benefits, Life and AD/D Benefits	Enroll participants in life plans and to assign beneficiaries those plans.
Disability Benefit	DISABILITY_BENEFIT	Benefits, Enroll in Benefits, Disability Benefits	Enroll employees in disability benefit plans.
Savings Plan Elections	SAVINGS_PLANS1	Benefits, Enroll In Benefits, Savings Plans	Enroll employees in savings benefit plans, assign beneficiaries, and identify investment elections.
Leave Plans	LEAVE_PLANS, LEAVE_PLANS_A	• Benefits, Enroll In Benefits, Leave Plans • Benefits, Enroll in Benefits, Leave Plans — CAN/INTL	Enroll employees in leave plans.
FSA Benefits (USA) (Flexible Spending Account Benefits)	FSA_BENEFITS	• Benefits, Enroll In Benefits, USA-FSA Benefits • Benefits, Enroll in Benefits, CAN-FSA Benefits	Enroll employees in North American companies in FSA plans.
Retirement Plans	RTRMNT_PLANS	Benefits, Enroll In Benefits, Retirement Plans	Enroll employees in Public Employees Retirement System (PERS) benefit plans.
Pension Plan Elections	PENSION_PLAN1	• Benefits, Enroll In Benefits, CAN-Pension Plans • Benefits, Enroll in Benefits, USA-Pension Plans	Enroll employees in benefit plans.
Vacation Benefit	VACATION_BENEFIT	Benefits, Enroll In Benefits, Vacation Benefits	Enroll employees in vacation buy and sell plans.

Enrolling Employee in a Benefit Program

Access the Ben. Prog. Partic. page.

Ben. Prog. Partic.

Lewis,Douglas

ID: KU0001

Benefit Program Participation

Find | View All First 1 of 1 Last

*Effective Date: 01/01/1980

*Benefit Program: KU1 GBI Master US Benefit Program

Currency Code: USD

Benefit Program Partic. page

Benefit Program

Set up a default benefit program because if you run a payroll before you enter a benefit program, payroll cannot process the employee.

You can override the default benefit programs with the correct benefit program.

Enrolling in Health Benefit Plans

Access the Health Benefits Elections page

Health Benefit Elections

Name: Santos,Antonio

ID: KU0010

Plan Type

Find | View All First 1 of 3 Last

Plan Type: 10 Medical

+

-

Coverage

Find | View All First 1 of 1 Last

*Coverage Begin Date: 01/01/1999

*Deduction Begin Date: 01/01/1999

Coverage Election: ☒ Elect ☐ Waive ☐ Terminate

*Election Date: 05/10/2000

Benefit Program: GBI US Pgm

Benefit Plan: KUMED1 Basic In-Network Medical

Option Code: 14

Coverage Code: 4 Family

Health Provider ID: 578290482

☒ Previously Seen

HIPAA Report Date (Emp):

HIPAA Report Date (Dep):

Employee Status: Active

Enroll All Dependents

Dependent/Beneficiaries

Customize 1-3 of 3

*ID	Name	Relationship	Health Provider ID	Prev Seen
01	Santos,Megan	Spouse		☐
02	Santos,Marguerite	Daughter		☐
03	Santos,Sean	Son		☐

+

Health Benefits Elections page

Health Provider ID

Tracks the primary care physician information for the employee's health provider. You can enter the name of the employee's doctor, an ID number, or any other format the health provider may require.

Previously Seen

Select to indicate that the employee is a current patient of the indicated physician.

HIPAA Report Date (Emp) and HIPAA Report Date (Dep)

Displays the date that the employee's certificate of creditable health coverage was printed, if his or her health coverage was terminated.

Other Covrg (other coverage)

(USF) This check box indicates the dependent has another active insurance plan.

Insurance Name

(USF) Enter the name of the other insurance plan.

FEHB Ind (Federal Employee Health Benefits indicator)

(USF) This check box indicates the dependent in enrolled in FEHB.

Enrolling in Life Plans

Access the Life and AD/D Elections page.

Life/ADD Elections

Name: Santos, Antonio **ID:** KU0010

Plan Type Find | View All First 1 of 6 Last

Plan Type: 20 Life

Coverage Find | View All First 1 of 1 Last

***Coverage Begin Date:** 01/01/1999 ***Deduction Begin Date:** 01/01/1999

Coverage Election: ☒ Elect ☐ Waive ☐ Terminate ***Election Date:** 05/10/2000

Benefit Program: GBI US Pgm

Benefit Plan: KUBLIF Basic Life Plan **Option Code:** 1

Coverage Options

Factor: Times Annual Rate And/Or **Flat Amount:**

☒ **Smoker** **Employee Status:** Active

Assign All Beneficiaries

Dependent/Beneficiaries Customize 1-4 of 4

*ID	Name	Relationship	Percent of Benefit	Flat Amount	Excess	Contingent
01	Santos, Megan	Spouse	25		☐	☐
02	Santos, Marguerite	Daughter	25		☐	☐
03	Santos, Sean	Son	25		☐	☐
04	Santos, Carissa	Mother	25		☐	☐

Total Primary Percent: 100 **Total Contingent Percent:** 0 **Update Totals**

Life/ADD Elections page

Coverage

Smoker

Smoker is selected if you have indicated that the dependent is a smoker in the Dependent/Beneficiary - Personal Profile page.

On this page, the Smoker check box is a display-only field. When Smoker is selected, the system uses the age-graded rates that have been defined for smokers when calculating the employee's life benefit cost.

Coverage Options

Use these group boxes to define plan coverage and the benefits base calculation rules.

These sections are active only if, in the Life and AD/D Plan Table page, you indicate that Coverage Options and Benefits Base information should be *Specified at the Employee Level*.

Factor and Flat Amount Define coverage as either a flat amount only or a factor x benefits base/salary + flat amount. In the latter case, enter both a Flat Amount and a Factor.

Also enter the rate with which the life or AD/D plan calculations are performed. Select either the *Annual Rate* (the employee's pay rate) or *Annual Benefits Base Rate*.

Dependent/Beneficiaries

ID Select the beneficiary ID. The selection list includes all of the beneficiaries that you set up for the employee using the Dependent/Beneficiary Data pages. Only beneficiaries that you identified as *Beneficiary* or *Both* (beneficiary or dependent) can be selected.

To delete a dependent enrollment, position the cursor at the line for the dependent that you want to delete and click Delete.

Percent of Benefit and Flat Amount Define the distribution benefit as a percent of benefit or a flat amount. If you enter a Flat Amount and more than one beneficiary, select one of the beneficiaries to receive any excess funds. Select the beneficiary by selecting the Excess check box.

Contingent (Optional) Indicate whether a beneficiary is primary or contingent (secondary to a primary beneficiary) by selecting this check box.

If you set up a primary beneficiary to receive 100 percent of the benefit, all other beneficiaries have *Contingent* selected.

Note. If you are working with a Dependent Life plan, add dependent IDs for all of the dependents that will be covered by the plan. In Dependent Life plans, the dependents are covered by life insurance, and the *employee* is the beneficiary.

If you have defined the Coverage method of the Life or AD/D plan that you're working with to be the *Sum of Dependent Coverage* in the Life and AD/D Plan Table, the Percent of Benefit field is not available for entry.

The Totals for all beneficiaries must equal 100 percent. If they do not, the system displays an error message and does not allow you to save your entries. To correct the entry, change one or more of the percentages so that the Totals are equal to 100 percent.

Enrolling in Disability Benefit Plans

Access the Disability Benefit page.

Disability Benefit	
Santos, Antonio ID: KU0010	
Plan Type Find View All First 1 of 2 Last Plan Type: 30 Short-Term Disability + -	
Coverage Find View All First 1 of 1 Last *Coverage Begin Date: 01/01/1999 [BT] [R] *Deduction Begin Date: 12/28/1998 [BT] [R] + - Coverage Election: ☒ Elect ☐ Waive ☐ Terminate [R] *Election Date: 05/10/2000 [BT] Benefit Program: Benefit Plan: KUSTD5 [Q] Option Code: Currency: Employee Status: Active	

Disability Benefit page

Enrolling in Savings Plans

Access the Savings Plan Elections page.

Savings Plan Elections

Santos, Antonio
ID: KU0010

Highly Compensated

Plan Type

Find | View All First 1 of 3 Last

Plan Type: 40 401(k)

+

-

Coverage

Find | View All First 1 of 1 Last

*Coverage Begin Date: 01/01/2000

*Deduction Begin Date: 01/01/2000

Participation Election: ☒ Elect ☐ Waive ☐ Terminate

*Election Date: 06/23/2000

Benefit Program: GBI US FT

Benefit Plan: KU401M 401(k) Employer Pct Match Option Code: 1

Before Tax Investment

Flat Amount: 3.000

Percent of Earnings: 3.000

Annual Excess Credits:

After Tax Investment

Flat Amount: 200.00

Percent of Earnings:

Employee Status: Active

Assign All Beneficiaries

Dependent/Beneficiaries

Customize | Find | 1-4 of 4

ID	Name	Relationship	Beneficiary Percentage	
01	Santos, Megan	Spouse	70	-
02	Santos, Marguerite	Daughter	10	-
03	Santos, Sean	Son	10	-
04	Santos, Carissa	Mother	10	-
+				

Total Beneficiary Percentage: 100 Update Totals

Savings Plan Elections page (1 of 2)

Investments		Customize	1-4 of 4
*Investment Option		*Investment Percent	
1	Money Market	25.00	-
2	Asset Allocation Fund	25.00	-
3	Bond Fund	25.00	-
4	Corporate Stock Fund	25.00	-
+...			
Total Investment Percentage:		100.00	Update Totals

Rollover Options				
Rollover Options: Specified at Plan Level				
	Plan Type	Benefit Plan	Deduction Code	Deduction Class
Before Tax to:	☐	☐	☐	☐
After Tax to:	☐	☐	☐	☐

Savings Plan Elections page (2 of 2)

Before Tax Investment and After Tax Investment

Flat Amount and Percent of Earnings

Define investment contributions as a flat amount or percent of earnings.

The system compares the Percent of Earnings to the percent of gross limits for employee Before- and After-Tax Investment values. The system also verifies that the sum of the Before- and After-Tax Investment values does not exceed the overall investment limit percentage that you defined for the savings benefit plan on Savings Plan Table.

Dependent/Beneficiaries

ID

Select the beneficiary ID. The selection list includes the beneficiaries that you set up for the employee using Dependent/Beneficiary Data.

To delete a dependent enrollment, position the cursor at the line for the dependent that you want to delete and click the delete button.

Beneficiary Percentage

Enter the percent of benefit for each beneficiary.

Note. The Total for all beneficiaries must equal 100 percent. If it does not, the system displays an error message and does not allow you to save your entry. To correct the entry, change one or more of the percentages so that Total is equal to 100 percent.

Investments

Investment Option

Select an investment option and allocate an investment percentage. Investment percentages must total 100 percent before they can be saved into the system. If there is more than one investment option associated with the chosen employee's savings plan, add more rows.

Rollover Options

You can enter rollover options only if Specified at Employee Level is selected on Savings Plan Table — Rollover of Funds.

Enter the Before Tax to and After Tax to rollover Plan Type, Benefit Plan, Deduction, and (if applicable) Deduction Class in the rows provided.

Enrolling in Leave Plans

Access the Leave Plans page.

Leave Plans (USA)

Santos,Antonio

ID: KU0010

Plan Type

Find | View All

First 1 of 2 Last

Plan Type: 50 Sick

+ -

Coverage

Find | View All

First 1 of 1 Last

*Effective Date: 01/01/2000

+ -

Coverage Election: ☒ Elect ☐ Waive ☐ Terminate

*Election Date: 06/23/2000

Benefit Program: GBI US Fulltime Benefit Pgm

Benefit Plan: KUSICK GBI Sick Leave Plan

Option Code: 1

Currency: USD

Employee Status: Active

Leave Plans (USA) page

Note. The Leave Plans page for Canadian and International users is identical to the page for U.S. users with the exception that it does not offer the option of choosing the FMLA (Family Medical Leave Act) Plan Type.

Enrolling in FSA Plans

Access the FSA Benefits (USA) page.

FSA Benefits (USA)									
Santos, Antonio	ID: KU0010								
Plan Type Find View All First 1 of 2 Last									
Plan Type: 60	Flex Spending Health - U.S.								
Coverage Find View All First 1 of 1 Last									
*Coverage Begin Date: 01/01/2000	*Deduction Begin Date: 01/01/2000								
Coverage Election: ☒ Elect ☐ Waive ☐ Terminate	*Election Date: 08/23/2000								
Benefit Program: GBI US Fulltime Benefit Pgm									
Benefit Plan: KUHFSa Healthcare FSA	Option Code: 1								
<table border="1"> <thead> <tr> <th>Contribution Level</th> <th>Account Information</th> </tr> </thead> <tbody> <tr> <td>Annual Pledge: 2000.00</td> <td>FSA Account Status: Active</td> </tr> <tr> <td>Credit Rollover Included in Pledge: \$0.00</td> <td>Contributions YTD: \$679.28</td> </tr> <tr> <td>Empl Contribution Override: Monthly</td> <td>Employee Status: Active</td> </tr> </tbody> </table>		Contribution Level	Account Information	Annual Pledge: 2000.00	FSA Account Status: Active	Credit Rollover Included in Pledge: \$0.00	Contributions YTD: \$679.28	Empl Contribution Override: Monthly	Employee Status: Active
Contribution Level	Account Information								
Annual Pledge: 2000.00	FSA Account Status: Active								
Credit Rollover Included in Pledge: \$0.00	Contributions YTD: \$679.28								
Empl Contribution Override: Monthly	Employee Status: Active								

FSA Benefits (USA) page

Note. The FSA Benefits page for Canadian users is essentially the same as the page for U.S. users with two exceptions. It offers a choice between Canadian Health Care and Canadian Retirement Counseling plan types (plan types 65 and 66) instead of Health and Dependent Care plan types (plan types 60 and 61), and it displays a Carryforward option of either *Claim* or *Credit*, if applicable.

Contribution Level

Annual Pledge

Enter the employee's annual pledge amount.

Credit Rollover Included in Pledge

Used by PeopleSoft Benefits Administration. It displays the amount of the excess benefits credits that have been assigned to an FSA plan at the end of a plan year. The PeopleSoft Benefits Administration system automatically provides the Credit Rollover Included in Pledge from the previous year, if you have designated that excess credits should be assigned to FSA plans in the Benefit Program Table.

Empl Contribution Override (employee contribution override)

If PeopleSoft Payroll for North America or PeopleSoft Payroll Interface is not implemented, this is optional.

Enter a value to have the system use this amount to calculate the employee's FSA contribution.

Leave the field blank to have the system use the *Annual Pledge* amount to calculate the employee's FSA contribution.

Account Information

The system reflects the FSA Account Status of the employee's FSA plan, as well as the employee's FSA Contributions YTD (contributions year-to-date).

Employees cannot transfer FSA funds from one account to another. As a rule, unused funds in an account at the end of a plan year are transferred to the employer.

Carryforward

Appears for Canadian Pension Plans. This value is automatically set to the value that you entered for the Employer Carryforward Choice in the FSA Benefits Table (Canada).

Enrolling in the PERS Plans

Access the Retirement Plans page.

Retirement Plans

Santos, Antonio ID: KU0010

Plan Type Find | View All First 1 of 1 Last

Plan Type: 70 PERS + -

Coverage Find | View All First 1 of 1 Last

***Deduction Begin Date:** 01/01/2000 [calendar icon] [refresh icon]

Participation Election: ☐ Elect ☐ Waive ☒ Terminate [refresh icon] ***Election Date:** 06/23/2000 [calendar icon]

Benefit Program: GBI US Fulltime Benefit Pgm

Benefit Plan: [text box] [search icon] **Option Code:**

Employee Status: Active

Retirement Plans page

Enrolling in Pension Plans

Access the Pension Plan Elections page. For U.S. users the plan types are 80 or 81. For Canadian users, the plan types are 82 through 87.

Pension Plan Elections

Santos, Antonio ID: KU0010

Plan Type Find | View All First 1 of 1 Last
Plan Type: 82 Pension Plan 1 - U.S.

Coverage Find | View All First 1 of 1 Last
*Deduction Begin Date: 01/01/1999
Participation Election: ☒ Elect ☐ Waive ☐ Terminate *Election Date: 05/10/2000
Benefit Program: GBI Master US Benefit Program
Benefit Plan: KUPENS GBI Pension Plan Option Code: 1

Voluntary Contributions
Flat Amount Contribution: 100.00 Or Percent of Earnings: 0.000

Salary for Pension Calculation: Employee Status: Active

Assign All Beneficiaries

Dependent/Beneficiaries Customize | 1-4 of 4

ID	Name	Relationship	Percent of Benefit	Flat Amount	Excess	Contingent
01	Santos, Megan	Spouse	25		☐	☐
02	Santos, Marguerite	Daughter	25		☐	☐
03	Santos, Sean	Son	25		☐	☐
04	Santos, Carissa	Mother	25		☐	☐

Total Primary Percent: 100
Total Contingent Percent: Update Totals

Pension Plan Elections page

Salary for Pension Calculation

Use to calculate the pension using a salary other than the employee pay rate.

Voluntary ContributionsEnter an amount that the employee voluntarily contributes to the pension plan. This is an amount *over* the amount that you define in the Pension Plan Table. Enter a flat amount or a percent of earnings.**Dependent/Beneficiaries****ID**

Select the beneficiary ID.

The selection list includes the beneficiaries that you set up for the employee using Dependent/Beneficiary Data.

To delete a dependent enrollment, position the cursor at the line for the dependent that you want to delete and click Delete.

Percent of Benefit and Flat Amount

Define the distribution benefit as a percent of benefit or a flat amount. If you enter a *Flat Amount* and more than one beneficiary, select one of the beneficiaries to receive any excess funds. Select the beneficiary by selecting the *Excess* check box.

Note. The Total for all beneficiaries must equal 100 percent. If it does not, the system displays an error message and does not allow you to save your entry. To correct the entry, change one or more of the percentages so that Total is equal to 100 percent.

Enrolling in Vacation Benefit Plans

Access the Vacation Benefit page.

The screenshot displays the 'Vacation Benefit' page for user Santos, Antonio (ID: KU0010). The page is organized into sections: 'Plan Type' (90, Vacation Buy) and 'Coverage'. Under 'Coverage', there are two columns of fields. The left column includes: '*Deduction Begin Date' (01/01/2000), 'Coverage Election' (radio buttons for Elect, Waive, Terminate; 'Elect' is selected), 'Benefit Program' (GBI US Fulltime Benefit Pgm), 'Benefit Plan' (KUVCBY), 'Vacation Hours' (8.00 with a 'Calculate' button), 'Buy/Sell Flat Amounts' (5.93), 'Goal Amount' (71.20), and 'Employee Status' (Active). The right column includes: '*Election Date' (06/23/2000), 'Option Code' (1), 'Vacation Buy or Sell' (Vacn Buy), and 'Goal Balance' (24.66). At the bottom right, the 'Vacation Accrual Processed' checkbox is checked. Navigation buttons like 'Find', 'View All', 'First', 'Last', and '1 of 1' are visible at the top of each section.

Vacation Benefit page

When you define vacation buy or sell benefit plans with the Vacation Buy/Sell Table, you define increments for the vacation hours and minimum and maximum amounts that an employee can buy or sell.

Vacation Hours

Number of hours that an employee buys or sells for the full plan year (a 12-month period).

The vacation hours that you enter must be at least the Minimum and not more than the Maximum numbers of vacation hours that are defined in the Vacation Buy/Sell Table. In addition, they must be entered in the Increment specified in the Vacation Buy/Sell Table.

Goal Balance

Updated by payroll. The system automatically stops deductions when the Current Goal Balance equals the Goal Balance.

Vacation Accrual Processed

During the first payroll processing cycle of the plan year, PeopleSoft Payroll calculates bought and sold vacation earnings for each participant. The system automatically selects this check box.

You will not see the buy or sell transactions reflected in employee leave balances until after you perform leave accrual processing, at which time, the system clears the check box.

Note. If you change employee job data after the system performs vacation buy and sell processing, it does not update its calculations based on the new job data. For example, an employee is hired on September 1 and is paid monthly, at a rate of \$20.00 per hour. The employee wants to buy 40 hours of vacation. The system assumes a 12-month period in which to spread the deduction. It calculates the Goal Amount as \$800.00 (40 hours X \$20 an hour), and calculated the pay period deduction as \$66.67 (40 hours X \$20 an hour/12 monthly periods per year). However, the company wanted the vacation amount based on the hire date. Because there were 4 months remaining in the year, September through December, the company manually calculated and entered \$200, or \$800 divided by 4.

(USF) Enrolling Employees in Benefit Programs and Plans

This section describes how to:

- Enroll participants into FEHB benefit programs using the Human Resources PAR process.
- Determine FEGLI Plan Coverage, Managing Retirement Coverage, and Designating FICA Status.
- Assign FEGLI benefits.
- Designate beneficiaries.
- Enroll employees in the TSP Agency automated contribution plan.

Pages Used to Enroll Employees in Benefit Programs and Plans Through the PAR

Page Name	Object Name	Navigation	Usage
Benefits/FEHB Data	GVT_BENDATA_SEC	- Workforce Administration, Job Information, Concurrent Hire USF - Click the Job tab. - Click Benefits/FEHB Data.	Enroll participants into benefit programs and plans.
FEGLI/Retirement Data/FICA	GVT_BENDATA1_SEC	- Workforce Administration, Job Information, Concurrent Hire USF - Click the Job tab. - Click FEGLI/Retirement/FICA.	Select the participant's FEGLI plan coverage, manage the employee's retirement coverage, designate and FICA status.
FEGLI Assignments - Assignee	GVT_ASSIGNEE	Benefits, Enroll in Benefits, Assign FEGLI Beneficiaries	Designate one or more assignees for an employee's FEGLI benefits coverage. Each assignee is given a share of the total coverage being assigned. The total of these percentages must be 100.
FEGLI Assignments - Assignee Benef (assignee beneficiary)	GVT_ASSIGNEE_BEN	Benefits, Enroll In Benefits, Assign FEGLI Beneficiaries	Designate one or more beneficiaries. Use to assign the FEGLI benefits of U.S. federal government employees and retirees.
TSP - Agency Basic	GVT_TSP_AUTO	Benefits, Enroll In Benefits, TSP Agency Basic	Enroll employees in the TSP Agency Automatic 1% Contribution plan.
TSP Investment Elections	GVT_TSP_INVEST	Benefits, Enroll In Benefits, TSP Investment Allocations	Select investment options.

(USF) Enrolling Participants Into FEHB Benefit Programs and Plans

Access the Benefits/FEHB Data page.

Benefits/FEHB Data

Benefits Control	
Benefit Record Number:	0
BAS Group ID:	
Benefit Program:	KN1 Netherlands Base Benefits

FEHB Eligibility	Eligibility
☐ Permanent	Elig Fld 1:
☐ Continuing Coverage	Elig Fld 2:
☐ Temporary Appointment > 1 yr	Elig Fld 3:
☐ Temp Appt < 1yr + FedSvc > 1yr	Elig Fld 4:
☒ Not Eligible	Elig Fld 5:
	Elig Fld 6:
	Elig Fld 7:
	Elig Fld 8:
	Elig Fld 9:

FEHB Date
FEHB Date:

Benefits/FEHB Data page

Benefits Control

This group box is used for Benefits Administration processing.

BAS Group ID (benefits administration group identification)

Applies only if your benefits system uses PeopleSoft Benefits Administration. It is used to link the participant to a particular Benefits Administration Group for PeopleSoft Benefits Administration processing later.

Benefit Program

Automatically set to the benefits program specified for the employee's Pay Group, which you specify in the Position Data page.

FEHB Eligibility

This group box identifies FEHB eligibility.

Permanent

Select this option for employees with a career conditional career appointment. Employees are eligible for FEHB if fields 1–9 in the *Eligibility* group box are also for users of Peoplesoft Benefits Administration. Here you enter eligibility values that refer to eligibility configuration values in the Eligibility Rules Table.

Continuing Coverage

Select this option for employees who are transferring into a position from another agency without a break in service and for rehires with a break in service of less than 30 days. Employees are eligible for FEHB.

Temporary Appointment > 1 yr

Select this option for an employee with a temporary appointment greater than one year. Employees are eligible for FEHB.

Temporary Appointment < 1 yr + FedSvc > 1 yr Select this option for an employee with a temporary appointment less than one year and continuous service greater than one year. Employees with this eligibility pay the entire cost of their FEHB coverage.

Not Eligible Select this option for employees ineligible for FEHB plan coverage. Most commonly used for employees with a temporary appointment of less than one year of service.

Eligibility

This group box is for Benefits Administration only. You enter the eligibility values that refer to the refer to eligibility configuration values in the Eligibility Rules Table.

FEHB

This group box is for Federal users. Enter the future date on which an employee will be eligible for FEHB coverage. Typically, the FEHB Date is one year from the employee's hire date.

Determining FEGLI Plan Coverage, Managing Retirement Coverage, and Designating FICA Status

Access the FEGLI/Retirement Data/FICA page.

The screenshot displays the 'FEGLI/Retirement Data/FICA' page with three main sections:

- FEGLI Section:**
 - FEGLI Code:** A dropdown menu showing 'C0' with a magnifying glass icon and the text 'Basic Only'.
 - Post 65 Basic Life Reduction:** A dropdown menu with a magnifying glass icon.
 - Living Benefits:** A checkbox labeled 'Living Benefits' followed by a 'Coverage Amount' field.
- Retirement Section:**
 - Retirement Plan:** A dropdown menu showing 'K' with a magnifying glass icon and the text 'FERS and FICA'.
 - FERS Coverage:** A dropdown menu showing 'Automatically Covered By FERS'.
 - Previous Retirement Coverage:** A dropdown menu showing 'Never Covered'.
 - Annuitant Indicator:** A dropdown menu showing '9' with a magnifying glass icon and the text 'Not Applicable'.
 - Annuity Commencement Date:** A date field with a calendar icon.
 - CSRS Frozen Service:** A text field showing '0000'.
- FICA Status-Employee Section:**
 - FICA Status-Employee:** A dropdown menu showing 'N' with a magnifying glass icon and the text 'Subject'.

FEGLI/Retirement Data/FICA page

FEGLI

FEGLI Code Use this field to select the participant's FEGLI plan coverage, including termination, waiving coverage, and coverage ineligibility.

Only active employees are allowed to increase their FEGLI coverage.

You can assign beneficiaries and allocate survivor benefits through the Life and AD/D Benefits - Beneficiaries page.

Note. When you have two or more FEGLI-related transactions to process for one employee that are effective on the same date, each one must be processed separately. You must enter the first transaction and save it before inserting a row to process the second transaction. When a second transaction is entered without saving the first, the system returns a message reporting that the transaction will be canceled.

Federal employees may assign their FEGLI benefits to another person, trust, or to a settlement company that will pay them a cash amount for these benefits. Assignment of benefits is handled in the FEGLI Assignments page group of the Administer Base Benefits (USF) menu.

Post 65 Basic Life Reduction

After federal employees pass the age of 65, their Basic Life plan coverage may be reduced. In the Post 65 Basic Life Reduction field, determine whether the chosen employee's life plan value will be reduced by 50%, 75%, or not at all.

Living Benefits

Select for terminally ill federal employees and retirees who have a life expectancy of nine months or less. With living benefits, a full or partial payment of the FEGLI Basic Life Insurance benefit is paid directly to the employee or retiree.

When an employee's request for living benefits has been approved by OFEGLI, use the PAR pages to process the election. Select an NOA Code of 805 (Elect Full Living Benefit) or 806 (Elect Partial Living Benefit).

When you select *Living Benefits* to process a partial living benefit, the *Coverage Amount* field becomes available.

After an employee selects living benefits, the only FEGLI code values available to the employee are the following: *Terminate All* and *Waive All Life Insurance*.

Coverage Amount

Used for employees who elect a partial living benefit. In this field, enter the Basic Insurance Amount (BIA). This is the balance of the coverage amount remaining.

Retirement

Retirement Plan

Select the employee's retirement plan coverage. You can select from entire list of available U.S. federal government retirement programs that may be available to your employees. Whether or not your agency actually offers all of these programs depends upon whether or not you have set them up in the Retirement Plan Table and have associated them with the benefit programs that your agency offers.

FERS Coverage

Indicate the level of FERS coverage allocated to employees who had federal retirement plan coverage prior to 1984. Employees before

1984, can select from the following valid values: *Elected Coverage Under FERS* or *Not Covered by FERS*.

All employees, who started federal retirement coverage after 1984, have a FERS Coverage of *Automatically Covered by FERS*.

Previous Retirement Coverage

Employees transferring in from another agency previously covered by a federal benefit plan should select *Previously Covered*. If the employee was not covered, select *Never Covered*.

Annuitant Indicator

Use for employees who are being rehired from retirement. If a formerly retired employee is receiving an annuity such as a pension plan payment, their pay may be offset by that annuity amount.

Determine whether or not the retirement annuity is applicable to the employee's wages. Indicate the former employment status of the employee, whether or not the employee was a retired enlisted or military officer, and the employee's retirement plan type (CSRS or FERS).

Annuity Commencement Date

Date when retirement annuities for a retired or soon-to-be-retired employee began or will begin. The system uses this date when determining how to calculate agency contributions and employee deductions for FEHB and FEGLI during the employee's last pay period.

Note. When an employee has worked less than a full pay period, PeopleSoft Payroll's Pay Calculation process prorates FEHB and FEGLI deductions according to OPM (Office of Personnel Management) rules.

CSRS Frozen Service

Frozen service is the U.S. federal government term for the total years and months of civilian and military service that is creditable in a CSRS component of an FERS employee (retirement plans FERS and FICA, FERS and FICA - Air Traffic Control, FERS and FICA - Special, and FERS and FICA - Reserve Tech), or in the case of a CSRS Offset employee (Retirement plans FICA + CSRS - Partial and FICA + CSRS Special - Partial), the service that would be covered in a CSRS component if the employee ever becomes covered by FERS.

In the CSRS Frozen Service field, enter this time span as a four-number code. The first and second positions indicate the number of years, while the third and fourth positions indicate the number of months. For example, a time span of 5 years and 3 months would be entered in CSRS Frozen Service as *0503*.

FICA Status - Employee

Select the employee's FICA status. Select from the following valid values: *E – Exempt*, *M – Medicare only*, or *N – Subject*.

Once you set up an employee's initial benefit program and plan enrollments through the PAR, you're ready to go on to the individual benefit pages to continue benefit plan enrollments, add plan coverage detail, enroll dependents, and assign beneficiaries. You can make changes in these pages without opening a PAR.

Assigning FEGLI Benefits

Access the FEGLI Assignments - Assignee page.

Assignee Number Designated automatically by the system; it automatically increases by one with each new assignee that you designate for an employee.

Assignee Name, National ID, and Assignee Share (Pct) (assignee share percentage) Enter the information for each assignee.
The total assignee shares for all assignees associated with an employee should equal 100.

Once you enter assignee information and save it, the system selects the Assigned check box in the FEGLI - Elections page for coverage that has been assigned, with the exception of FEGLI plan options that have been *Waived*. When an employee elects a partial living benefit, the BIA is assigned along with any optional insurance. This is with the exception of Option C - Family coverage.

Designating Beneficiaries

Access the FEGLI Assignments - Assignee Benef page.

Assignee Beneficiary Number The system designates and automatically increases by one for each beneficiary added to an assignee.

Assignee Name, Relationship, and Benef Share (Pct) (benefit share percentage) Enter the information for each assignee.

Same Address as Assignee Select this check box if the beneficiary shares this information with the assignee. While this check box is selected, the Address and Phone Information fields are unavailable.

Enrolling Employees in the TSP Agency Automatic Contribution Plan

Access the TSP - Agency Basic page.

TSP - Agency Basic

Freed,Rhonda

ID: B-BU144

Empl Rcd#: 0

*Plan Type: 7Z

Participation Information

Find | View All First 1 of 1 Last

*Effective Date:

+

-

Participation Election:

☒ Elect
 ☐ Waive
 ☐ Terminate

*Elect Date:

11/15/2002

Benefit Plan:

Optn:

Employee Status:

Active

Benefit Program:

MJ BAS Eligibility F/T

TSP - Agency Basic page

Enter the Effective Date. By default, the system sets Participation Election to Elect and the Elect Date to the system date.

Use Benefit Plan to enroll the employee in the TSP 1% Agency Contribution plan. TSP 1% Agency Contribution plans have a plan type of 7Z.

Employees typically must complete a waiting period of two open seasons after their hire date before they can be enrolled in the TSP 1% Agency Contribution plan.

Selecting Investment Options for TSP Plans

Access the TSP Investment Elections page.

TSP Investment Elections

Freed,Rhonda Employee ID: B-BU144 Rcd#: 0

Input Source Find | View All First 1 of 1 Last

*Effective Date: 11/15/2002 Input Source: User Input + -

*Option		*Percent	+ -
C	Common Stock - C Fund	60.00	+ -
S	Thrift Savings Plan - S Fund	40.00	+ -

Total: 100.00

TSP Investment Elections page

Option

Enter the type of investment in which you are allocating an investment percentage. If there is more than one investment option associated with the chosen employee's savings plan, you can add more rows.

Percent

Enter the investment percentage allocated for each Option associated with this savings plan. Investment percentages must total 100 before they can be saved into the system.

Terminating Dependent Enrollments or Beneficiary Status

Remember that you enroll dependents and assign beneficiaries when you enroll employees. To terminate a dependent enrollment or beneficiary status, you must enter a row of data with the termination date (just as you do with employees). You make these changes on the Benefit Detail page for the benefit in question, such as Life & AD/D Benefits. You do not make the changes on the Dependent/Beneficiary Data page.

If you try to delete dependent/beneficiary records on benefit detail pages that have court orders applied to them, the system informs you that the dependent or beneficiary has a court order that provides a legal right to benefit coverage.

Warning! If you delete dependent/beneficiary data using the Dependent/Beneficiary Data page, you'll destroy history. Once you change enrollment data, it won't matter that the dependent or beneficiary data is available on the Dependent/Beneficiary Data page. In fact, it must remain to provide correct historical information.

CHAPTER 9

Reviewing Enrollments and Benefit Calculations

This chapter discusses how to:

- Audit your benefit information.
- View benefit summary data.
- Override the frequency of benefit deductions.

Auditing Your Benefit Information

PeopleSoft uses the same set of audits for both PeopleSoft Human Resources Base Benefits business process and PeopleSoft Benefits Administration.

Audits are intended to catch errors that would otherwise show up when you try to process enrollments or changes. Some of them can be used at any time and others relate to a specific purpose, such as eligibility analysis or enrollment.

If you look through the audits, you see why it's important to audit your data and make corrections before you process enrollments.

Here are the PeopleSoft Human Resources audits and corrective actions. Perform these audits regardless of whether you use PeopleSoft Human Resources or PeopleSoft Benefits Administration to enroll participants.

Base Benefits Audit Functions and Corrective Actions

Base Benefits Audit	Audit Functions	Corrective Actions
Benefit Tables	Identifies vacation plans in the Benefit Program Table with an associated Calculation Rules code where rounding rules are defined in the Calculation Rules Table.	Set up the Calculation Rules Table information without rounding rules.
	Identifies health plans in the Benefit Program Table with a rate unit that is not set to <i>None</i> in the Rate Schedule Table.	Correct the information in the Rate Schedule Table.
Employee Data	Identifies employees with Personal data but with no Employment data.	Enter employee Employment data.

Base Benefits Audit	Audit Functions	Corrective Actions
	Identifies employees with Personal and Employment data but with no Job data.	Enter employee Job data.
	Identifies employees with birth dates less than or equal to 16 years from the current date.	Verify that employee should be 16 years old or less or correct the error.
Enrollment Data	Identifies participants with a nonstandard dependent - not a spouse, son, daughter, father, or mother - enrolled in health benefits.	Verify that the person should be a dependent or correct the error.
	Identifies participants that work in the same company as their dependents, elect the same health coverage in the same plan type as their dependents, and cover the health benefits of their dependents. For the system to perform this check, enter both SSNs on employee Personal Data and on Dependent Data.	Verify that the enrollments are correct or correct the error.
	Identifies participants with dependents enrolled in health benefits where the dependent is older than 25 (or older than 19 and not a student), not a spouse, and not handicapped. The audit identifies persons who typically are not dependents.	Correct the dependent information.

The following table contains a list of the plan types delivered by the Base Benefits business process for the U.S. federal government and a breakdown of how benefit plan information is controlled by the PAR process and the individual benefit plan pages.

Note. Benefit plan enrollments for FEGLI and Retirement are made in the PAR while benefit plan enrollments for FEHB, TSP, and Leave are performed through the individual benefit plan pages.

Where Employee Benefits Data is Controlled: PAR vs. the Individual Benefit Plan

Plan Type	Benefits Data Controlled in PAR	Benefits Data Controlled in Individual Plan Pages
FEHB	FEHB Eligibility	Coverage Begin and End Date (Elections) Deduction Begin and End Date (Elections) Plan Type (FEHB Election) (Elections) Coverage Code (Elections) Dependent ID (Dependents)
FEGLI	FEGLI Coverage Living Benefits Enrollment	FEGLI Assignments (Beneficiaries) % Of Benefit Allocation (Beneficiaries)
TSP		Coverage Begin and End Date (TSP Employee/Matching - Elections) Deduction Begin and End Date (TSP Employee/Matching - Elections) Benefit Plan (TSP Election) (TSP Employee/Matching - Elections) Before Tax Investment (TSP Employee/Matching - Elections) After Tax Investment (TSP Employee/Matching - Elections) Investment Option/Investment Percent (TSP Employee/Matching - Investments) Beneficiary ID/Percent of Benefit (TSP Employee/Matching - Beneficiaries)
Leave Plans		Effective Date, End Date (Leave Plans) Benefit Plan (Leave Plan Election) (Leave Plans) Grandfathered Carryover (Leave Plans)
Retirement Plans	Retirement Plan FERS Coverage Annuitant Indicator Previous Retirement Coverage CSRS Annuity Offset Amount	TSP 1% Agency Contribution (TSP Agency Basic)

Note. PeopleSoft provides audits for your benefit information. Some audits are specifically for the Base Benefits business process and others are for PeopleSoft Benefits Administration. After you enroll participants, check your data using the PeopleSoft Human Resources audits.

Viewing Benefits Summary Data

During regular payroll processing cycles, the system uses all relevant human resources, benefits, and payroll table information and employee data to process deductions and compensation.

Regardless of whether your organization uses PeopleSoft Payroll or PeopleSoft Payroll Interface, you can view a summary of employee benefit data, including the most recent payroll deduction. You can view either:

- The general benefits summary.
- The payroll interface benefits summary.

See Also

PeopleSoft 8.8 eBenefits PeopleBook

Pages Used to View Benefits Summary Data

Page Name	Object Name	Navigation	Usage
Benefits Summary	BENEFITS_SUMMARY1	Benefits, Review Employee Benefits, Benefits Summary (w/Pay Dedns)	View deduction information for all the selected employee's benefit plans.
Benefits Summary (PI DedCalc)	BENEFITS_DED_SUMM1	Benefits, Review Employee Benefits, Benefits Summary (w/PI Dedns)	View details for all an employee's benefits programs. For U.S. employees only.

Overriding the Frequency of Benefit Deductions

After the system has performed benefit deductions for your employees, you can override the frequency of a deduction amount for individual employees using the Benefit Arrears/Frequency Ovrdr page.

Page Used to Override Deduction Frequency

Page Name	Object Name	Navigation	Usage
Benefit Arrears/Frequency Ovrdr	BENEF_DED_OVERRIDE	Benefits, Enroll In Benefits, Set Max Arrears/Frequency Ovrdr	Define frequency.

Enter the Benefit Arrears Amount and Deduction Frequency Information

Access the Benefit Arrears/Frequency Ovrdr page.

Benefit Arrears/Frequency Ovrd

Freed,Rhonda ID: B-BU144

Benefit Arrears/Frequency Ovrd Find | View All First 1 of 1 Last

*Plan Type: Supplemental AD/D

Benefit Plan:

Deduction Period

☒ First Pay Period

☐ Second Pay Period

☐ Third Pay Period

☐ Fourth Pay Period

☐ Fifth Pay Period

Maximum Arrears Payback ☐

Company: BN1

Pay Group: BM2

Employee Status: Active

Benefit Program: MJ BAS Eligibility F/T

Currency: USD

Benefits Arrears/Frequency Ovrd page

Maximum Arrears Payback

When employee net pay is insufficient to cover a deduction and it's not possible to deduct all appropriate amounts, the employee is in arrears. In other words, the employee owes the employer for a deduction that could not be made.

Using this field, you can specify how the system handles the payback of arrears balances, by indicating the maximum amount of arrears payback that can be taken out of an employee's paycheck.

Deduction Period

This group box enables you to override the deduction frequency. Normally, the frequency with which a deduction is taken from an employee's paycheck is controlled through the deduction table and paygroup.

CHAPTER 10

Performing Nondiscrimination Testing

This chapter provides an overview of Section 401 and Section 129 nondiscrimination tests and discusses how to:

- Define highly compensated earnings.
- Identify highly compensated employees.
- Set up test criteria and plans.
- Define the nondiscrimination test run control.
- Running nondiscrimination tests.
- Understand nondiscrimination tests results.
- View nondiscrimination test results.
- Set limits to comply with test results.

Understanding Section 401 Nondiscrimination Tests

In this section, we discuss the details of the following 401 nondiscrimination tests:

- Basic and Alternate Section 401(k) Tests.
- Basic and Alternate Section 401(m) Tests.
- Aggregate Limit Test.

Basic and Alternate Section 401(k) Tests

According to current IRS criteria, to be considered nondiscriminatory, a 401(k) plan must meet one of two tests:

- The basic Actual Deferral Percentage (ADP) test for Section 401(k) states that the average ADP for highly compensated employees (ADP_{HCE}) cannot be more than 125 percent of the average ADP for employees that are not highly compensated (ADP_{NHCE}).
- The alternate ADP test requires that the ADP_{HCE} cannot exceed the ADP_{NHCE} by more than 200 percent, provided the difference between the ADP_{HCE} and the ADP_{NHCE} does not exceed 2 percentage points.

Basic and Alternate Section 401(m) Tests

The basic Actual Contribution Percentage (ACP) test for Section 401(m) states that the average ACP for highly compensated employees (ACP_{HCE}) cannot be more than 125 percent of the average ACP for employees that are not highly compensated (ACP_{NHCE}).

According to the alternate 401(m) test, the ACP_{HCE} cannot exceed the ACP_{NHCE} by more than 200 percent, provided the difference between the ACP_{HCE} and the ACP_{NHCE} does not exceed 2 percentage points.

Aggregate Limit Test

If both the ADP and ACP Tests do not pass the basic 125 percent test and both pass the alternative 2 percent test, the system *automatically* runs the new Aggregate Limit Test when you run the 401(k) or 401(m) NDT report. The Aggregate Limit Test indicates that the sum of the ADP and ACP for the entire group of eligible highly compensated employees cannot exceed the *aggregate limit* of the non-highly compensated group, which is the *greater* of:

1. The sum of 1.25 times the *greater* of the ADP_{NHCE} or the ACP_{NHCE} , *and*: 1.25 times the *greater* of the ADP_{NHCE} or the ACP_{NHCE} , *and*
2. Two percentage points plus the *lesser* of the ADP_{NHCE} or the ACP_{NHCE} , with the exception that this cannot exceed two times the *lesser* of the ADP_{NHCE} or the ACP_{NHCE} ; **OR**
3. The sum of 1.25 times the *lesser* of the ADP_{NHCE} or the ACP_{NHCE} , *and*
4. Two percentage points plus the *greater* of the ADP_{NHCE} or the ACP_{NHCE} , with the exception that this cannot exceed two times the *greater* of the ADP_{NHCE} or the ACP_{NHCE} .

The results of the Aggregate Limit Test will appear on the new Section 401 Results page after the 401(k) and 401(m) reports have been run. If you view the Section 401 Results page *before* you run one or both of these reports, the Aggregate Limit Test portion of the Section 401 Results page will be blank.

Defining Highly Compensated Earnings

Before you run a nondiscrimination test, define the highly compensated earnings to be processed in the nondiscrimination test.

To define highly compensated earnings:

1. Define a special accumulator for highly compensated earnings.
2. Link that special accumulator to the appropriate earnings.

See Also

PeopleSoft 8.8 Payroll for North America PeopleBook, “Defining Earnings Codes and Earnings Programs,” Establishing Earnings Programs

Identifying Highly Compensated Employees

Now that the parameters for running nondiscrimination testing are defined, you must identify employees who are highly compensated employees using the Job Data Component.

A highly compensated employee is defined as someone who:

1. Was a 5 percent (or more) owner of the organization at any time during the current or preceding year; or

2. Received more than \$80,000 (indexed for inflation) in compensation in the preceding year; or
3. Received more than \$80,000 (indexed for inflation) in compensation in the preceding year, and was among the most highly paid 20 percent of employees in the organization.

An active employee is not treated as highly compensated in the current (determination) year if that employee was not considered highly compensated in the preceding (look-back) year. This rule does not apply if the employee is a 5 percent (or more) owner. The system will not classify employees hired during the current year as highly compensated employees unless they also are or were a 5 percent (or more) owner during the current year.

To identify employees who are 5 percent (or more) owners:

1. Access the Work Location - Employment Information: Employment Data page.
2. Select the Owns 5% (or More) of Company check box to identify an employee as a 5 percent or more owner.

See Also

PeopleSoft 8.8 Human Resources PeopleBook: Administer Workforce, “Hiring Your Workforce”

Setting Up Test Criteria and Plans

You can perform nondiscrimination tests for 401(k) and 401(m) plans. For 401(k), the system uses before-tax amounts. For 401(m), it uses after-tax amounts. Perform these tests according to IRS criteria that you define, for the benefit plans that you identify.

Page Used to Set Up Test Criteria and Plans

Page Name	Object Name	Navigation	Usage
NDT Rules Table (Nondiscrimination Rules Table)	NDT_HCE_TABLE	Set Up HRMS, Product Related, Base Benefits, Nondiscrimination Rules	Set up the test parameters with the Nondiscrimination Test Table before you perform a test.

Setting Up Test Parameters

Access the NDT Rules Table page.

NDT Rules Table	
Nondiscrimination Test Table Find View All First ◀ 1 of 1 ▶ Last	
*Effective Date:	01/01/2000  + -
HCE Determination Criteria	
*Compensation Method to be Used:	Compensation in Top Percent ▾
Compensation Minimum:	\$85,000.00 and in Top %: 20
Optional Exclusions: Minimum Age:	Minimum Service Months:
ADP Calculation Criteria	
*Annual Compensation Lmt (401a):	\$170,000.00 Calculate using: Current Year ▾
*Annual Contribution Lmt (402g):	\$10,500.00
401(k) and 401(m) NDT Rules	
ADP for HCE is not more than ADP for other employees multiplied by	1.25
Excess of ADP for HCE over that of other employees is not greater than %	2.00
and ADP for HCE is not more than ADP for other employees multiplied by	2.00

NDT Rules Table page

Effective Date Enter the effective date for your nondiscrimination test criteria which enables you to maintain history of your test criteria.

HCE Determination Criteria

Compensation Minimum Set up the system to take into account *all* employees who have received the compensation minimum, or narrow the determination down to those employees who received the compensation minimum and who are among the most highly paid (top 20 percent) employees in your organization. We give you the option of changing this percentage.

Minimum Age and Minimum Service Months To set up your system to exclude certain employees from the determination of the top paid 20 percent of employees in your organization, enter the appropriate minimum age or minimum service months.

Because HCE determination is based upon the previous year's wages, the system refers to the end of the previous year when checking these values against the employee population. If you are running your nondiscrimination test for the *current* plan year and you've set a Minimum Age of 21, the top 20 percent group will be reduced by the number of employees who have not reached age 21 by the end of the *previous* plan year.

ADP Calculation Criteria

Annual Compensation Lmt (annual compensation limit) Enter the annual compensation limit and annual contribution limit for the test.
and Annual Contribution Lmt (annual contribution limit)

Calculate Using

Employers have the option to perform the ADP and ACP calculations based on either the current or previous year's data. You can run 401(k) and 401(m) tests that use either current or previous year data. On the Nondiscrimination Testing Table, you can tell the system which year's data to use by selecting *Current Year* or *Previous Year*.

Note. Because the nondiscrimination testing procedure for 401(k) and 401(m) plans includes compensation data from the preceding plan year, use the results of the tests to better forecast for the current year. This is because the preceding year compensation data is used to calculate Actual Deferral Percentages and Actual Contribution Percentages for the non-highly compensated employee (NHCE) population, upon which nondiscrimination test results are based. With these figures defined, you can monitor your HCE population for compliance.

If you choose to perform nondiscrimination testing using previous year NHCE data, there is no need to perform NHCE forecasting; only HCE data needs to be forecasted and compared to the previous year's data. You can still elect to test based on the current year's data, however, and utilize the forecasting feature to help monitor your plan's nondiscrimination status throughout the year.

Identifying Benefit Plans to Include in a Test

This section explains how you specify the benefit plans that are included in nondiscrimination testing.

To identify benefit plans to include in NDT testing:

1. Access the Benefit Plan Table page.
2. Select the Include in Nondiscrimination Testing check box.

The test will include *all* of the benefit plans with this check box selected. This option is available for all savings plans.

See Also

[Chapter 4, "Setting Up Benefit Plans," Defining Benefit Plans, page 49](#)

Defining the Nondiscrimination Test Run Control

After you set up your special accumulators and their associated earnings, set up the parameters for your nondiscrimination test through run control pages.

Pages Used to Define the Nondiscrimination Test Run Control

Page Name	Object Name	Navigation	Usage
NDT 401 Run Parm (parameters)	RUNCTL_NDT	Benefits, Conduct Nondiscrimination Tsts (Tests), Section 401 Testing, Define Test Information	Define the special accumulator that you want the system to use and to identify the company and pay group combinations that you want to include in your test.
Run 129 Testing	RUNCTL_129	Benefits, Conduct Nondiscrimination Tsts (Tests), Section 129 Testing, Define Test Information	Define the information that controls nondiscrimination testing for Section 129 dependent care reimbursement accounts.

Defining Special Accumulators and Company and Pay Group Criteria

Access the NDT 401 Run Parm page.

NDT 401 Run Parm

***Plan Year Begin Date:** 01/01/2000

***Month End Date:** 04/30/2000

Year End Projection Percentage: 67.000

***Special Accumulator Code:** 401 401K Eligible Earnings

***Benefits Base:** Annual Rate

***Year Code:** Current Plan Year

NDT Section 401 Customize | Find | First 1-8 of 8 Last

*Company	Description	*Pay Group	Description	
GBI	Global Business Institute	KU1	US Weekly	
GBI	Global Business Institute	KU2	US Biweekly	
GBI	Global Business Institute	KU3	US Semi-Monthly	
GBI	Global Business Institute	KU4	US Monthly	
GBI	Global Business Institute	KU5	US R & D Biweekly	
GBI	Global Business Institute	KU6	US Fire Safety - Biweekly	
GBI	Global Business Institute	KU7	US PI Wkly 1	
GBI	Global Business Institute	KU8	US PI Wkly 2	

Customize | Find
First 1-8 of 8 Last

NDT 401 Run Parm page

Plan Year Begin Date	Use to define the plan year that you want to use for the test.
Month End Date	Enter the month end date through which compensation data will be in the database.
Year End Projection Percentage	When testing for the current year, this field enables you to define whether you want the system to project until year-end. To define a projection, enter the percentage that you want the system to use.
Special Accumulator Code	Enter the special accumulator code for the test. The system will use this accumulator to determine employee compensation for the test.
Benefits Base	Enter the benefits base that you want to use, either <i>Annual Rate</i> or <i>Annual Benefits Base Rate</i> . For example, suppose you initiate a test for the current year on May 31, but you want projections until the end of the plan year, you need to project for the remaining 7 of the total 12 months, which means you enter 58.33% as the <i>Year End Projection Percentage</i> .
Year Code	Use the year code to indicate whether testing is for the <i>Current and Prior Plan Year</i> , the <i>Current Plan Year</i> , or for the <i>Prior Year</i> . Because the new rules for the determination of highly compensated employees determine HCE status based primarily upon the previous year's data, the system must gather salary information for the previous year and store it. When you run a Section 401 test for the first time in the testing year, always select <i>Current and Prior Plan Year</i> on the 401 NDT Run Control page. In subsequent testing throughout that year you can select <i>Current Plan Year</i> .

NDT Section 401

Company and Pay Group Identify the companies and the pay groups that you want to include in this test.

Defining Section 129 Rules

Access the Run 129 Testing page.

Run 129 Testing

*Special Accumulator Code: 401 401K Eligible Earnings

*Plan Year Begin Date: 01/01/2000

*Month End Date: 04/30/2000

Year End Projection Percentage: 67.000

*Benefits Base: Annual Rt

*Year Code: Current Yr

Exclusion: Min Service Months: 12

Exclusion: Minimum Age: 18

Employee Test Population			
*Company	Description	*Pay Group	Description
GBI	Global Business Institute	KU1	US Weekly
GBI	Global Business Institute	KU2	US Biweekly
GBI	Global Business Institute	KU3	US Semi-Monthly
GBI	Global Business Institute	KU4	US Monthly
GBI	Global Business Institute	KU5	US R & D Biweekly

SLOB Criteria for the 55% Test

☒ Cafeteria Plan Dollar Limit: \$25,000.00 Minimum Employee Count: 10

Single Line of Business Definition			
*Company	Description	*Pay Group	Description
GBI	Global Business Institute	KU1	US Weekly
GBI	Global Business Institute	KU2	US Biweekly
GBI	Global Business Institute	KU3	US Semi-Monthly
GBI	Global Business Institute	KU4	US Monthly
GBI	Global Business Institute	KU5	US R & D Biweekly

Run 129 Testing page

- Special Accumulator Code** Enter the special accumulator code for the test. The system will use this accumulator to determine employee compensation for the test.
- Plan Year Begin Date** Use to define the plan year that you want to use for the test.
- Month End Date** Enter the month end date through which compensation data will be in the database.
- Exclusion: Min Service Months** (exclusion: minimum service months) Enter to establish a minimum length of service for employees included in the test.
- Exclusion: Minimum Age** Use to set a minimum age limit for the employees included in the test.
- Benefits Base** You must enter the benefits base—either *Annual Rt* or *Benef Base*.

Year Code When you run a Section 129 test for the first time in the testing year, always select *Both Years* on the 129 NDT Run Control page. In subsequent testing throughout that year you can select *Current Yr*.

Note. The system requires you to always select the *Both Years* option if you will be testing based on Separate Lines of Business (SLOB). You can choose from *Both Years*, *Current Yr*, or *Prior Yr*.

Employee Test Population

Pay Group and Pay Group Identify the companies and the pay groups that you want to include in this test.

SLOB (Separate Line of Business) Criteria for the 55% Test

Cafeteria Plan If you have a flexible benefits or cafeteria plan, select this check box.

Dollar Limit Companies that have cafeteria plans typically set the Dollar Limit to \$25,000, but it can be set lower. If you set the limit to \$25,000, employees who earn less than that amount will be excluded from the Section 129 test.

Minimum Employee Count Use to restrict the size of separate lines of business included in the test.

SLOB Criteria for the 55% Test For the SLOB Criteria for the 55% Test field, choose between two methods of restricting the test population. You can restrict the test population by company and pay group or by SLOB.

Company and Pay Group If you use SLOB, indicate the company and pay group associated with each separate line of business.

Running Nondiscrimination Tests

In this section, we discuss how to:

- Determine the number of highly compensated employees.
- Run 401(k) and 401(m) testing.
- Run Section 129 nondiscrimination testing.
- Produce the 401 Nondiscrimination Testing report.
- Product the Section 129 Nondiscrimination Testing report.

Pages Used to Run Nondiscrimination Testing

Page Name	Object Name	Navigation	Usage
129 HCE Test	RUNCTL_NDT001	Benefits, Conduct Nondiscrimination Tsts (Tests), Section 129 Testing, Identify Highly Comp Employees	Determine the number of highly compensated employees in your organization before you perform Section 401 or Section 129 nondiscrimination tests.
NDT 401 HCE Test	RUNCTL_NDT001	Benefits, Conduct Nondiscrimination Tsts (Tests), Section 401 Testing, Identify Highly Comp Employees	Determine the number of highly compensated employees in your organization before you perform Section 401 or Section 129 nondiscrimination tests.
Run Control (401(k) Nondiscrimination)	PRCSRUNCNTL	Benefits, Conduct Nondiscrimination Tsts (Tests), Section 401 Testing, 401(k) Nondiscrimination Test	Initiate 401(k) and 401(m) testing using the NDT 401(k) and 401(m) Nondiscrimination pages.
Eligibility Cross Section Test	PRCSRUNCNTL	Benefits, Conduct Nondiscrimination Tsts (Tests), Section 129 Testing, Eligibility Cross Section Test	Initiate Section 129 nondiscrimination testing. The run control page is identical for all three tests.
55 Pct Average Benefits Tests	PRCSRUNCNTL	Benefits, Conduct Nondiscrimination Tsts (Tests), Section 129 Testing, 55% Average Benefits Tests	Initiate Section 129 nondiscrimination testing.
Concentration Test	PRCSRUNCNTL	Benefits, Conduct Nondiscrimination Tsts (Tests), Section 129 Testing, Concentration Test	Initiate Section 129 nondiscrimination testing.

Determining the Number of Highly Compensated Employees

Access the 401 Highly Comp Employees - NDT 401 HCE Test page or the 129 Highly Comp Employees – 129 HCE Test page.

NDT 401 HCE Test

Run Control ID: 1
[Report Manager](#)
[Process Monitor](#)

Report Request Parameter(s)

NDT Test Type: 129 NDT

NDT 401 HCE Test page

129 HCE Test

Run Control ID: 1

[Report Manager](#) [Process Monitor](#) [Run](#)

Report Request Parameter(s)

NDT Test Type: 129 NDT

129 HCE Test page

Warning! Before determining the number of highly compensated employees, first set the nondiscrimination test parameters.

NDT Test Type

Choose from the following valid values: *Std NDT* (Standard Nondiscrimination Test, for Section 401 plans), *129 NDT* (Section 129 Nondiscrimination Test), and *129 SLOB* (Section 129 Separate Line of Business Nondiscrimination Test).

Run

Click to run this request. PeopleSoft Process Scheduler runs the HCE test process at user-defined intervals.

Running 401(k) and 401(m) Testing

Access the 401(k) Nondiscrimination - Run Control page.

Warning! Before running a nondiscrimination test using this page, you must first set the nondiscrimination test parameters in the 401 NDT Run Control page and determine the number of highly compensated employees in the 401 Highly Comp Employees - NDT 401 HCE Test page.

When the system performs a test, it uses the total eligible earnings for employees. For total earnings, the system uses the earnings balance for the special accumulator that you defined in the run control for this test.

If an employee works in multiple companies, the system accumulates earnings for all the companies that you marked for nondiscrimination testing.

Run

Click to run this request. PeopleSoft Process Scheduler runs the 401 NDT test process at user-defined intervals.

Running Section 129 Nondiscrimination Testing

Access the NDT 129 Eligibility Cross Section Test page.

Note. For SLOB users: The SLOB rules only relate to the NDT 129 55% Average Benefits test. If you want to run this test for separate lines of business, use the following procedure:

To run the Section 129 SLOB testing process:

1. Run the Highly Compensated Employees determination test.
Select *129SLOB* as your NDT Test Type.
2. Run the NDT 129 55% Average Benefits test.
3. Re-run the Highly Compensated Employees Determination test.
This time, select *129NDT* as your NDT Test Type.
4. Run the remaining NDT 129 tests.

Warning! Before running a nondiscrimination test using this page, first set the nondiscrimination test parameters in the 129 NDT Run Control page and determine the number of highly compensated employees in the 129 Highly Comp Employees – 129 HCE Test page.

When the system performs a test, it uses the total eligible earnings for employees. For total earnings, the system uses the earnings balance for the special accumulator that you defined in the run control for this test.

If an employee works in multiple companies, the system accumulates earnings for all the companies that you marked for nondiscrimination testing.

Run Click to run this request. PeopleSoft Process Scheduler runs the process at user-defined intervals.

Understanding Nondiscrimination Test Results

As a result of a nondiscrimination test, the system updates employee data for the current and previous year tests, using these codes:

N	Indicates an employee is not eligible for the plan.
E	Indicates a highly compensated employee who is not a 5 percent owner.
H	Indicates a highly compensated employee (who may be a 5 percent owner).

The Savings Plans page displays the highly compensated flag for the current year only. The previous year's highly compensated flag is not available online.

Viewing Nondiscrimination Test Results

In this section, we discuss nondiscrimination test results and how to:

- View results for an individual.

- View Section 401 test results for all employees.
- View Section 129 test results for all employees.
- Run nondiscrimination test reports.

Pages Used to View Nondiscrimination Test Results

Page Name	Object Name	Navigation	Usage
Savings Plan Elections	SAVINGS_PLANS1	Benefits, Enroll In Benefits, Savings Plans	View nondiscrimination test results for an individual.
Results of 401	NDT_401_RESULTS	Benefits, Conduct Nondiscrimination Tsts (Tests), Section 401 Testing, Review Test Results	View the nondiscrimination test results for all employees in 401(k) and 401(m) tests.
NDT Results 129	NDT_129_RESULTS	Benefits, Conduct Nondiscrimination Tsts (Tests), Section 129 Testing, Review Test Results	View the nondiscrimination test results for all employees.

Viewing Results for an Individual

Access the Savings Plan Elections page.

As a result of the last nondiscrimination test that you performed, the system indicates that an employee is highly compensated (based on the current year) by displaying the *Highly Compensated* indicator at the top of the page.

See Also

[Chapter 8, “Enrolling Participants,” Enrolling Participants in Benefit Programs and Plans, page 121](#)

Viewing Section 401 Test Results for All Employees

Access the Results of 401 page.

Results of 401			
NonDiscrimination test results for Plan Year beginning 01/01/2000 using data as of 04/30/2000			
Testing performed using Current Year data for NHCE population.			
Employee Counts: HCE:	NHCE:		
	Actual Year-to-Date Results		Forecasted Year-End Results
	ADP 401(k)	ACP 401(m)	ADP 401(k) ACP 401(m)
Average for HCE:			
Average for NHCE:			
Basic 125% Test:			
Alternate 2% Test:			
Discriminatory Excess:			
Aggregate Limit Test:			

Results of 401 page

Average for HCE and
(highly compensated
employees) and **Average
for NHCE** (average for
non-highly compensated
employees)

The system will report the average actual contribution percentage (ACP) and actual deferral percentage (ADP) for highly compensated and non-highly compensated employees.

**Basic 125% Test and
Alternate 2% Test**

The systems will automatically indicate a *Pass* or *Fail* status.

Discriminatory Excess

If both the Basic and the Alternate 2% Tests failed, the system displays the discriminatory excess percentage.

Aggregate Limit Test

If the system runs this test, it will automatically indicate a *Passed* or *Failed* status.

Viewing Section 129 Test Results for All Employees

Access the NDT Results 129 page.

NDT Results 129			
NonDiscrimination test results for Plan Year beginning 01/01/2000 using data as of 04/30/2000			
Eligibility Cross-Section Test			
Eligible NHCE Count:	Unsafe Harbor Pct:		
Eligible HCE Count:	Safe Harbor Pct:	Test Result	
NHCE LookUp Concentration (%):	Calculated Harbor Pct:		NOT RUN
55% Average Benefit Test			
Count: NHCE:	HCE:	Separate Line of Business ☐	
Benefits:			Test Result
Avg Benefits:	Benefits Ratio (%):		FAILED
5% Owner Concentration Test			
Benefits Paid to 5% Owners:		Test Result	
Total Benefits Paid:	Benefits Ratio (%):		NOT RUN

NDT Results 129 page

This page displays the results of the Eligibility Cross-Section Test, the 55% Average Benefit Test, and the 5% Owner Concentration Test. If you elected to test for separate lines of business, the Separate Line of Business check box will be selected.

Running Nondiscrimination Test Reports

You can produce nondiscrimination testing reports that provide a breakdown of the testing results by employee (divided into highly compensated employee and non-highly compensated employee groups) as well as a display of the calculations involved in the test.

401 Nondiscrimination Testing reports will also show the results of the Aggregate Limit Test if test result conditions require this test to be performed.

See Also

[Chapter 4, "Setting Up Benefit Plans," Defining Benefit Plans, page 49](#)

Setting Limits to Comply With Test Results

In order to comply with the regulations governing non-discrimination testing, you may need to change the savings limits for a highly compensated employee for a specific benefit plan. This applies only to 401(k) and 401(m) plans.

See Also

[Chapter 8, "Enrolling Participants," Enrolling in Savings Plans, page 127](#)

CHAPTER 11

Monitoring Savings Plans

This chapter discusses how to:

- Generate Savings management pages.
- Monitor 403(b) and 457 savings plans balances.
- Manage the 402(g) and 457 limit extensions and overrides.

Generating Savings Management Pages

This section provides an overview of savings management pages and discusses how to:

- Run the Calculate 403(b) Extensions process.
- Run the Age-50 Extension process.

Understanding Savings Management Pages

The types of savings management pages available depends on the type of savings plan offered by your organization. PeopleSoft Human Resources Base Benefits provides the following potential types of savings management limit extension pages:

- 402(g) 15-year catch-up extension for 403(b) plans.
- 457 3-Yr catch-up extension for 457 eligible governmental plans.
- 402(g) Age 50 extension for 401(k) and 403(b) plans.
- 457 Age 50 extension for 457 eligible governmental plans.

The Savings Management pages are used to:

- Extend the regular 402(g) limit.
- Extend the regular 457 limit.
- Monitor the balances for 403(b) plans.
- Monitor the balances for 457 plans.
- Override the 402(g) limit and/or the 457 limit.

There are two processes used to generate the limit extension page types. The processes can be run for a company's employee population or for an individual employee. The pages can also be manually added. The processes are:

- The Calculate 403(b) Extensions process generates *both* the 402(g) catch-up records *and* the 457 catch-up records when it is run.
- The Identify Age-50 Extension process generates *either* the 402(g) age extension *or* the 457 age-50 extension.

Pages Used to Generate Savings Management Pages

Page Name	Object Name	Navigation	Usage
SavMgmt Balances (savings management balances)	RUNCTL_SV403B	Benefits, Monitor Savings Pln Extensions, Calculate 403(b) Extensions	Calculate the company's or an individual employee's balances service years, eligible earnings, and the projected limits for the current or next year. Employees don't need to be enrolled in the 403(b) Savings Plan to run the Balance process. This process updates the Savings Management page.
Bn Age50 Runctl	BN_AGE50_RUNCTL	Benefits, Monitor Savings Pln Extensions, Identify Age-50 Extensions, Bn Age50 Runctl	• Identifies employees in PeopleSoft Payroll for North America who are age 50 or more. • Creates Age-50 limit extension records that extend/increase the 402(g) and/or 457 Savings Plan limits for elective deferrals as authorized by IRS regulations. The process is run separately for each limit type. For each limit type, a single Age-50 extension record will be produced for each year for each eligible employee in PeopleSoft Payroll for North America. the process defaults the election to <i>ON</i>.

Running the Calculate 403(b) Extensions Process

Access the SavMgmt Balances page.

SavMgmt Balances

Run Control ID: GN2002M01-101 [Report Manager](#) [Process Monitor](#) [Run](#)

Report Request Parameter(s)

*Company:

*Calendar Year:

EmplID:

Checkpoint / Restart

Chk Point Interval in Minutes:

Restart Employee ID:

Process to Restart:

SavMgmt Balances page

Chk Point Interval in Minutes (check point interval in minutes)

Because this is a long process, you can indicate how often the system should save or update information to the database during the process.

In case of unexpected system failure, this could limit the amount of reprocessing the system would have to repeat.

Restart Employee ID and Process to Restart

This will be populated with last successful Employee ID processed if the process did not successfully complete.

The Calculate 403(b) Extensions process sets the election of the catch-up extension to *N* (OFF). Manually reset this value on the Savings Management page.

The 402(g) catch-up page is generated for all employees in PeopleSoft Payroll for North America. If the employee has 15 or more years of service, the extension amount is populated with the 402(g) cap expansion from the 403(b) Limit Table. If the employee has less than 15 years of service, the extension amount will be zero.

The 457 catch-up page is produced only for employees in PeopleSoft Payroll for North America with a 457 record in the prior year or 457 deductions in the current year.

Running the Age-50 Process

Access the Bn Age50 Runctl page.

Bn Age50 Runctl

Run Control ID: FPS01
[Report Manager](#)
[Process Monitor](#)

Run

Report Request Parameter(s)

*As Of Date:

*Company:

☒ 402(g) Limit

☐ 457 Limit

Annl Cap Expsn:

EmplID:

Bn Age50 Runctl page

As Of Date Enter the last day of the calendar year for which the Age-50 extension applies.

402(g) Limit and 457 Limit Select applicable radio button for the limit extension you want to run.

Two separate runs are required to produce each type of the Age-50 limit extension.

Annl Cap Expsn Enter the amount specified by the IRS.

The Age-50 Limit Extension type pages are produced for the employees in PeopleSoft Payroll for North America who are age 50 on or before the date specified on the run control page. The current law sets the date as a calendar year end date, 12-31-YYYY.

The Age-50 process always sets the election option to Y(ON). Manually reset this value on the Savings Mgt page.

Monitoring the 403(b) and 457 Savings Plans Balances

This section discusses how to:

- Monitor 403(b) and 457 balances.
- Run the Identify Age-50 Extensions Process.

Pages Used to Monitor the 403(b) and 457 Plans Process

Page Name	Object Name	Navigation	Usage
Savings Mgt (management)	SAVINGS_MGT_EE	Benefits, Enroll in Benefits, Savings Extensions/Overrides	Manage the 402(g) and 457 limit extensions and overrides for 401(k), 403(b) and 457 Savings Plans. Review the year-to-date (YTD) and Life-To-Date (LTD) balances from the 403(b) process, enter contributions made at another company, and review an employee's contribution amount for each applicable limit. Monitor the Catch Up Limit extension and election for 457 plans.
403(b) Proc Msg (process messages)	SV403_MESSAGES	Benefits, Monitor Savings Pln Extensions, Review 403(b) Process Messages	Review any error message that occurred from the 403(b) process.

Monitoring 403(b) and 457 Balances

Access the Savings Mgt page.

Savings Mgt

Name: Jones,Rebekah **ID:** K0G001

Deferred Compensation Find | View All First 1 of 1 Last

***Company:** AR Department of the Army ***Calendar Year:** **402(g) Limit** ☒ **457 Limit** ☐ **+** **-**

***Limit Ext Type:** Catch-Up **Ext Election** ☒ **Ext Amt:** \$0.00 **Limit Amount** \$0.00 **Override:**

Balance Information

	Year-to-Date	Life-to-Date
Elective Employee Deferrals(402(g))	\$0.00	\$0.00
Non-Elective Employee Deferrals	\$0.00	\$0.00
Other Employer Contributions	\$0.00	\$0.00
Total Deferrals	\$0.00	\$0.00
Includible Earnings	\$0.00	
402(g) Cap Extension Used	\$0.00	\$0.00

Savings Mgt page (1 of 2)

Balance Adjustments (This Company Only)			
Elective Deferrals Adjustment:	\$0.00	Vesting Adjustments:	\$0.00
Non-Elective Deferrals Adjustment	\$0.00	Employer Contribution Adjustment	\$0.00

General / Alternative Election Data (all Applicable Companies)			
☐ Override Service Years Calc	Service Years YTD:	Service Years LTD:	
Employer Contribution Maximum:	\$0.00	Termination Date:	
Current Year Contribution Subject to 415 Limit:	\$0.00	Hardship Withdrawal Date:	
		Limit Reduction Amount:	\$0.00

Updated on	User ID

Savings Mgt page (2 of 2)

Savings Mgt			
Name:	Jones,Rebekah		ID: K0G001
Deferred Compensation Find View All First 1 of 1 Last			
*Company:	AR	Department of the Army	*Calendar Year:
		☐ 402(g) Limit	☒ 457 Limit + -
*Limit Ext Type:	Catch-Up	Ext Election ☒	Ext Amt: \$0.00
		Limit Amount	\$0.00
		Override:	
457 Adjustments			
Other Employer Deferrals:		\$0.00	
Balance Information			
457 YTD Deferrals:		\$0.00	457 LTD Deferrals:
		\$0.00	\$0.00

Updated on	User ID

Savings Mgt page; For Savings Plan Type 457

Deferred Compensation

Company, Calendar Year, and Limit Extension Type Select the desired company, calendar year, and limit type.

Limit Ext Type (limit extension type) *Catch-Up* will be displayed on the page used to monitor 403(b) balances.

402(g) Limit and 457 Limit Select the savings plan you want to review.

Ext Election (extension election) If applicable, select this check box.

Ext Amt (extension amount) For 403(b) plans, the amount displayed here represents the 15-Year Catch-up extension amount as generated by the 403(b) process.

This field is used as an extension to the 402(g) limit when you select the Ext Election check box. The system uses the lesser of the following three:

1. The amount entered in the 402(g) Annual Cap Expansion field located on the 403(b) Limit Table.
2. The amount entered in the 402(g) Lifetime Cap Expansion field located on the 403(b) Limit Table minus the amount of the Life-To-Date 402(g) Cap Used displayed on the 403(b) Balances page.
3. The employee's years of service multiplied by the amount entered in 402(g) Per Year Max Average field located on the 403(b) Limit Table, then subtract the amount of the Life-To-Date Employee Elective Deferrals 402(g) displayed on the 403(b) Balances page.

Ext Amt (extension amount) For 457 plans, the underutilized 457 plan amount for previous years is entered here. The amount represents the 3-Year Catch-up extension amount.

Limit Amount Override The override amount entered here will be used instead of the 402(g) limit or extended 402(g) limit if the Ext Election is checked ON. It will apply to only 403(b) plans.

457 Adjustments

This group box displays if you selected 457 in the Savings Plan Type field.

Other Employer Deferrals The amount deferred to a 457 plan with another employer during the years of service with the current employer.

457 YTD Deferrals and 457 LTD Deferrals 457 year-to-date and life-to-date balances will automatically be maintained as part of the 403(b) Extensions process for those employees that are enrolled in both a 457 and 403(b) plan.

Balance Information

The system displays the YTD and LTD balances calculated from the 403(b) process.

Balance Adjustments (This Company Only)

Use this group box to enter employee contributions from a previous employer. The Calculate 403(b) Extensions process will use these figures.

Elective Deferrals Adjustment, Non-Elective Deferrals Adjustment, and Employee Contribution Adjustment Enter the new amounts. Both the Calculate 403(b) Extensions and the Pay Calculations processes use these fields.

Vesting Adjustments Enter the new amount. Both the Calculate 403(b) Extensions and the Pay Calculations processes use these fields. A vesting adjustment is considered to be a type of employer contribution, so it is used along with the *Employer Contribution YTD/LTD* balance fields and the *Employee Contribution Adjustment* field.

General / Alternative Election Data (all Applicable Companies)

Override Service Years Calc (override service years calculation)	Select this check box if you need to override the system-calculated Service Years YTD and/or the Service Year LTD displayed on the 403(b) Projections page.
Employer Contribution Maximum	This is the amount entered in the Maximum Yearly Deduction field located on the 415(c) Limit Table.
Termination Date (403[b] expected termination date)	If applicable, enter the date.
Hardship Withdrawal Date	Enter if applicable. The 403(b) Extensions process calculates and displays the corresponding Limit Reduction Amount in the record for the year following the hardship withdrawal date.
Current Year Contribution Subject to 415 Limit	This is the year-to-date deductions that are subject to the 415(c) limit.
Limit Reduction Amount	This amount constitutes the YTD elective deferrals up to the hardship withdrawal date, and is used to reduce the 402(g) limit for the following year when the contributions are reactivated.

Monitor 403(b) Plan Balances

The Calculate 403(b) Extensions process generates the Savings Management page(s) used for monitoring the 403(b) and 457 Savings Plan year-to-date and life-to-date balances.

To monitor 403(b) and 457 plan balances:

1. Run the Calculate 403(b) Extensions process on the Savings Management Balances page (RUNCTL_SV403B) to create the initial 403(b) page. The process creates the initial Savings Mgt (management) page and is identified with a Limit Extension Type of *Catch-Up*. The 402(g) Limit radio button will be selected.

The Savings Mgt page for 457 plans will be identified with a Limit Ext Type of *Catch-up*. The 457 Limit radio button will be selected.
2. Make any adjustments that should be considered during the 403(b) calculation process using the Savings Management page.
3. After each confirmed payroll period, run the Calculate 403(b) Extensions process on the Savings Management Balances page (RUNCTL_SV403B) to update balances for both the 403(b) and 457 plans.
4. Review employee contributions and deferrals on the Savings Mgt (management) page for 402(g) Catch-up Limit Extension Type.
5. Review 403(b) error messages.

This process creates a single 403(b) record for employees in PeopleSoft Payroll for North America. If an employee has less than 15 years of service, the extension amount will be 0. If an employee has 15 years or more of service, the extension amount will be equal to the 402(g) Annual Cap Expansion amount on the 403(b) Limit Table.

The process defaults the extension election to *OFF*. If the election is *ON* at year-end, the process will reset it to *OFF* when run in the subsequent year.

Running the Identify Age-50 Extensions Process

The Identify Age-50 Extensions process:

- Identifies the employees in PeopleSoft Payroll for North America who are age 50 or more.
- Creates Age-50 limit extension records that extend/increase the 402(g) and/or 457 Savings Plan limits for elective deferrals as authorized by IRS regulations. The limit extension records are displayed on a Savings Management page.

Age 50 records may be manually added. For employees not eligible for either a “Catch-Up” or “Age-50” extension, the added record can be used to enter a

- 402(g) override amount on the Age-50 402(g) page, or
- 457 override amount on the Age-50 457 page.

Managing the 402(g) and 457 Limit Extensions and Overrides

This section discusses how use the Savings Mgt pages to manage limit extensions and overrides.

Managing Extensions and Overrides

The override capability on the Savings Management page affects only those deductions subject to the 402-(g) or the 457 limits. The override function works as follows for the two limits:

- The EXT_ELECTION must be checked ON for the override to be recognized.
- When the Age-50 process or the Calculate 403(b) Extensions processes are run for a subsequent year, the override amount will be cleared.
- The override fields on the SAVINGS_MGT_EE records are used instead of the 402(g) regular/extended limit and/or the 457 regular/extended limit.

The overrides on the following records are used as follows:

SAVINGS_MGT_EE_ Record LIMIT_TYPE Value	SAVINGS_MGT_EE_ Record LIMIT_EXT_TYPE Value	Savings Plans to Which Override Applies
402	A (Catch-Up)	403(B) plans only

SAVINGS_MGT_EE_Record LIMIT_TYPE Value	SAVINGS_MGT_EE_Record LIMIT_EXT_TYPE Value	Savings Plans to Which Override Applies
402	B (Age-50)	401(k) and/or 403(b) plans • If an override exists on both 402 Limit Type records, the SUM of the overrides will apply to 403(b) plans. • Only the 402 B Limit Type will apply to the 401(k) plan. • If the employee is NOT age 50, the client may manually add an Age 50 record in order to enter an override.
457	A and/or B	457 Plan • The new legislation states that the 3-Year 457 catch-up and the Age-50 457 catch-up cannot be used in the same year. • The system will use the override on the limit extension for the LIMIT_EXT_TYPE record that is checked <i>ON</i> or if both 457 LIMIT_EXT_TYPE records are checked <i>ON</i> and have override entries, the system will determine the record with the higher limit and will use the override amount on ONLY that record. • If an employee is NOT eligible for either of the catch-ups, the employer may manually add an Age 50 record with only the override amount entered.

Example

The following example uses the these parameters:

- Calendar Year: 2002
- Regular 457 Limit: \$11,000
- Max. Annual 457 Catch-up: \$22,000
- Age-50 extension: \$1,000
- Employee's Underutilized 457 Amount: \$10,000

The following example illustrates limit determination when both 457 limit extension type (Catch-up) records are checked *ON*. The example uses the following parameters:

1. Determination of the 3-Year Catch-up Limit

The system will first determine the LESSER of:

- Regular 457 Limit + Underutilized Amount (i.e., \$11K + \$10K = \$21K) or,
- Max. Annual 457 Catch-up (\$22,000)

2. Determination of the higher of the 3-Year Catch-up Limit vs. the Age 50 Catch-up Limit

Then it will determine the HIGHER of:

- The result from Step 1 (i.e., \$21K) (This record is represented by LIMIT_TYPE 402, LIMIT_EXT_TYPE A.) or,
- Regular 457 Limit + Age 50 extension (i.e., \$11K + \$1K = \$12K) (This record is represented by LIMIT_TYPE 402, LIMIT_EXT_TYPE B.)

The higher record in Step 2 is the override that is selected for use when both catch-up records are checked ON.

CHAPTER 12

Managing FMLA Plans

This chapter provides an overview of administering FMLA plans and discusses how to:

- Enter FMLA leave requests.
- Determine FMLA eligibility.
- Schedule FMLA leave.
- Track FMLA activity.

Understanding FMLA Plan Administration

The Family Medical Leave Act (FMLA) protects benefits and job restoration for employees who take a leave from work to care for themselves or family members. This law went into effect August 5, 1993, and contains provisions regarding employer coverage, employee eligibility and entitlement, notice and certification, continuation of health benefits, and job restoration.

Before you can actively manage FMLA information for your workforce, you must first activate PeopleSoft's FMLA Administration facility and then define your organization's FMLA plans. Use the Installation Table and the FMLA Plan Table to perform these steps. You also need to associate FMLA plans with benefit programs, using the Benefit/Deduction Program Table.

After setting up your plans, use their parameters to determine employee eligibility and to calculate available FMLA leave.

See Also

Chapter 4, "Setting Up Benefit Plans," Setting Up FMLA Plans, page 64

Chapter 5, "Building Base Benefit Programs," page 75

Entering FMLA Leave Requests

This section describes how to:

- Request employee leaves.
- Monitor leave requests.

Page Used to Enter FMLA Leave Requests

Page Name	Object Name	Navigation	Usage
Request	FMLA_LV_REQUEST1	Benefits, Track FMLA (Family Medical Lv), Request/Authorize/Track Leave	Enter FMLA leave requests.

Requesting Employee Leaves

Access the Request page.

The screenshot displays the 'Request' page for an FMLA leave request. At the top, there are tabs for 'Request', 'Eligibility', 'History', and 'Activity'. The 'Request' tab is active. Below the tabs, the employee's name 'Santos, Antonio' and 'Employee' are shown, along with the 'EmpID: KU0010'. The page title is 'FMLA Leave'. There are navigation links 'Find | View All' and 'First 1 of 1 Last'. The 'FMLA Request ID' is 001. The 'Request' section contains the following fields: '*Request Date' (03/01/2000), 'Begin Date' (03/15/2000), '*Return Date' (07/15/2000), '*Leave Reason' (Employee Illness), 'Leave Type' (Irregular Intermittent), and 'Time Requested' (16 Days). The 'Approval' section contains: 'Approval Status' (Approved), 'Reason Denied', 'Approver' (KU0011), 'Approval Dt' (03/01/2000), and 'Leave Canceled On'.

Request page

FMLA Request ID

Initially given a value of NEW.

When the request is saved, the system assigns a unique FMLA request ID. IDs are incremented sequentially from 001 to 999 within each employee record.

Note. If you are processing employees with multiple jobs, the FMLA Administration facility does not use the employee record number. The system tracks FMLA leave requests by individual employees rather than by job.

Request

Request Date

The date the employee made the FMLA protected leave request.

Begin Date

The first day of the employee's requested leave.

The system uses the begin date for any record needing an effective date. Because eligibility and entitlement can be affected when the begin date

is edited, you cannot edit it once the request's approval status changes to *Approved* or *Denied*, or once the request has been completed or canceled.

To change the begin date after one of these events has taken place, change the approval status back to *Open*, edit the begin date, recalculate eligibility and entitlement with the Leave Request Eligibility page, and manually adjust the leave schedule.

Return Date

The date the employee is scheduled to return from leave.

The return date is not the day of FMLA protected leave, rather, it is the first day of work after the leave is completed.

Select *Expected/Open* if the request is still pending or in process.

Select *Actual/Completed* when the employee actually returns from leave.

Leave Reason

Select the appropriate leave reason. You can add more valid reasons through the PeopleTools Data Designer.

Leave Type

Indicate the “regularity” of the requested leave.

- *Continuous* leave is unbroken full-day leave.
- *Irregular* leave is broken, but on a regular schedule; for example, every Thursday and Friday for eight weeks.
- *Irregular/Intermittent* leave involves unspecified times during the planned leave period. If you change these fields after the leave is completed, the system gives you a warning.

If you change this field after the leave is completed, the system gives you a warning.

Time Requested

For reference only.

Approval

Approval Status

When you select *Approved* or *Denied*, the system automatically populates the Approver and Apprvl Dt (approval date) fields with your employee ID and the current date.

Note. You can approve requests for employees determined to be ineligible for FMLA coverage.

Leave Canceled On

If the employee decides to cancel the leave request before taking any leave, enter the date of this decision.

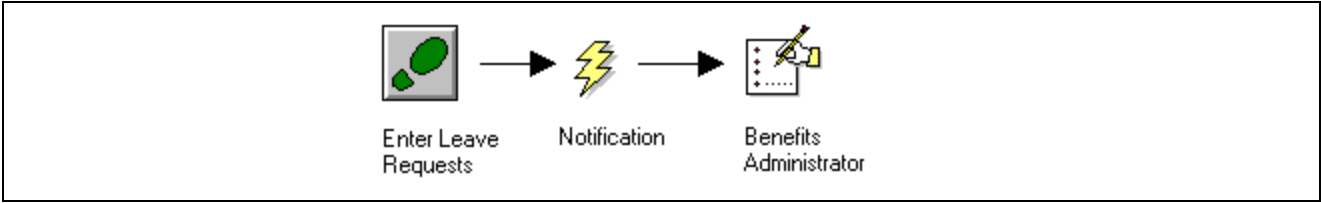
Do not use this field to indicate denial of the request or to record the employee's early return from leave.

See Also

PeopleSoft 8.8 Application Fundamentals for HRMS PeopleBook, “Working With Multiple Jobs”

Monitoring Leave Requests

Use the Monitor Leave Requests Workflow Process to locate new requests and notify the benefits administrator via email.



Monitor Leave Requests Workflow

See Also

PeopleTools PeopleBook: Workflow

Determining FMLA Eligibility

The system uses data from a selected FMLA plan, the leave request, and job and payroll information to determine leave eligibility.

Page Used to Determine FMLA Eligibility

Page Name	Object Name	Navigation	Usage
Eligibility	FMLA_LV_REQUEST2	- Benefits, Track FMLA (Family Medical Lv), Request/Authorize/Track Leave - Click the Eligibility tab.	Determine FMLA leave eligibility and entitlement.

Determining Eligibility

Access the Eligibility page.

Request		Eligibility		History		Activity	
Santos, Antonio				Employee		EmplID: KU0010	
Request Find View All First 1 of 1 Last							
Request ID:	001	Begin Date:	03/15/2000	Return Date:	07/15/2000	+ -	
		Reason:	EI	*Status:	E	Q	
FMLA Plan ID:		KUF	Roll-Fwd	FMLA Year Begin Date:		03/15/2000	
Eligibility and Entitlement				Date of Last Determination: 03/01/2000			
Eligibility Determination				Entitlement Determination			
FMLA Eligible Hours:		2092	☒ Eligible	Weeks = Std-Hours			
FMLA Eligible Svc Weeks:		132	☒ Eligible	As of Requested Begin Dt:		12.0	480.0
				As of Expected Return Dt:			
Job and Employment Data							
Original Hire Date:		09/12/1997	Std Hours / Week:		40.00		
Officer Code:		None	Std Hours Override:				

Eligibility page

FMLA Plan ID

Attach the FMLA leave request to a specific FMLA leave plan. The system uses the parameters defined for the chosen plan to calculate eligibility and entitlement values. You cannot edit the FMLA plan ID once the request has been approved, denied, completed, or canceled.

If you change the FMLA plan ID when the approval status is *Open* and the Eligibility and Entitlement process has been run, the system resets all fields dealing with eligibility and entitlement to their default values and sends you a warning informing you that eligibility and entitlement must be reexamined.

Note. This field initially defaults from the employee's Benefit Program, but you can override it here.

Eligibility and Entitlement

Click to start the eligibility and entitlement processes. These processes use employee job history, the FMLA plan parameters, payroll data, and data on the Request page to populate all of the other fields on the Eligibility page with the exception of Std Hours Override (standard hours override).

Note. The Eligibility and Entitlement button is not available if the prerequisite data for the leave request is not entered in the Request page. It will also be unavailable if the request's status is Completed, Denied, or Canceled.

FMLA Eligible Hours

Displays the results of the system's determination of the employee's FMLA eligible hours. The eligible hours are defined as the hours worked during the 52 weeks before the leave effective date. Depending upon the rules that you've established for the associated FMLA plan, the system determines the

eligible hours using either the employee's job history or PeopleSoft Payroll data. The system will select the Eligible check box if the employee has worked enough hours to be eligible for FMLA protected leave.

Note. The Eligible check boxes are indicators of the system's determination based on the FMLA Plan rules, and are informational only. They have no effect on your ability to approve or deny the request.

FMLA Eligible Svc Weeks(FMLA eligible service weeks)

Displays the results of the system's determination of the employee's FMLA eligible service weeks. FMLA Administration determines service weeks using information from the employee's job history and the rules for the associated FMLA plan. The system will select the Eligible check box if the employee has worked enough service weeks to be eligible for FMLA protected leave.

As of Requested Begin Dt
(as of requested begin date)

Displays the weeks and hours of FMLA protected leave that the employee is entitled to as of the leave's begin date.

To determine whether the request can be approved, compare the values displayed here to the time requested in the employee's FMLA protected leave request.

As of Expected Return Dt
(as of expected return date)

Only used for leaves requested under plans that use a Roll-Backward calendar year. Displays the weeks and standard hours of entitled protected leave *remaining* for the employee in the current FMLA year as of the leave's expected return date.

The Roll-Backward calendar is so dynamic that a leave request using it may appear to demand denial based on an apparent lack of entitlement; however, the employee in question could gain the necessary entitlement during the course of the leave.

Original Hire Date, Officer Code, Std Hours/Week
(standard hours per week)

The Job and Employment Data group box displays basic job and employment information for the employee as of the leave effective date and the last determination of eligibility and entitlement.

The system enters the average number of hours the employee works per workweek as of the leave effective date in the Std Hours/Week field.

Std Hours Override
(standard hours override)

Sometimes system-computed Standard Hours values are not accurate. Employees often make leave requests well in advance of their leave's begin date, and part-time employees' weekly hours can be variable.

Enter a new value when appropriate.

Note. This field does not affect eligibility or entitlement—it is only used to more accurately convert between the display of “weeks” versus “hours.”

See Also

Chapter 4, “Setting Up Benefit Plans,” Setting Up FMLA Plans, page 64

Scheduling FMLA Leave

This section describes how to:

- Manually schedule FMLA leave.
- Schedule repeating weekly leaves.
- Designate paid leave days for repeating schedules.

Pages Used to Schedule FMLA Leave

Page Name	Object Name	Navigation	Usage
History	FMLA_LV_HISTORY	• Benefits, Track FMLA (Family Medical Lv), Request/Authorize/Track Leave • Click the History tab.	Schedule and track FMLA leave.
Schedule Leave Days	FMLA_LV_SCHED_DLG	Click Schedule Leave on the History page.	Create repeating weekly FMLA schedules.
Mark Paid Leave	FMLA_LV_PAID_DLG	Click Mark Paid Leave on the History page.	After creating a repeating schedule, designate specific days as paid leave.

Manually Scheduling FMLA Leave

Access the History page.

The screenshot shows the 'History' tab selected in the top navigation bar. Below the tabs, the employee's name 'Santos, Antonio' and 'Employee' are displayed, along with 'EmplID: KU0010'. The 'Request' section shows 'Request ID: 001', 'Begin Date: 03/15/2000', 'Return Date: 07/15/2000', and 'Reason: EI'. The '*Status:' is 'E'. There are two summary tables: 'Leave Summary' and 'Entitlement Summary'. The 'Leave Summary' table shows 'Scheduled: Weeks: 3.6 Hours: 144.0' and 'Taken Today: Weeks: 3.6 Hours: 144.0'. The 'Entitlement Summary' table shows 'As of Leave Begin: Weeks: 12.0 Hours: 480.0' and 'Remaining Today: Weeks: 8.4 Hours: 336.0'. Below these tables, there are links for 'Schedule Leave' and 'Mark Paid Leave'. The 'History' section shows a table with columns for 'Week Begin Dt', 'Sunday', 'Monday', 'Tuesday', 'Wednesday', 'Thursday', 'Friday', 'Saturday', and 'Total Hrs'. The table lists three weeks starting from 03/12/2000, 03/19/2000, and 03/26/2000, each with a 'Total Hrs' of 8.0. There are checkboxes for each day of the week and plus/minus buttons for each row.

History page

Leave Summary	Tracks the weeks and hours of FMLA protected leave that are scheduled and that have already been taken.
Entitlement Summary	Tracks the total amount of FMLA protected leave that the employee is entitled to (for all leaves, not just the current one).
Schedule Leave	Click to create “template” schedules for repeating leave.
Mark Paid Leave	Click to designate a portion of the FMLA leave as paid leave.
Week Begin Dt (week begin date) and Sunday through Saturday	Enter the start date of each scheduled week of FMLA protected leave and the hours of leave for each leave day. To treat certain days of leave as paid leave, select the check box for those days. (Some employers require that employees use paid leave before they can use FMLA leave.)

Note. You can use these fields to manually schedule a leave request on a day-by-day basis. You can also use it to adjust a previously scheduled leave. But if you use the automatic scheduling capabilities of the Schedule Leave Days and Mark Paid Leave pages (detailed later in this section), keep in mind that the system will overwrite previously scheduled days with the template schedules that you design through these pages.

Scheduling Repeating Weekly Leaves

Access the Schedule Leave Days page.

Schedule Leave Days

Scheduling Information

	Sun	Mon	Tue	Wed	Thu	Fri	Sat
Weekly Template							
Repeat Template From				Through			
Repeat Template For	Every Week						

Current Schedule Summary

	Weeks	Hours
Entitlement:	12.0	480.0
Scheduled:	3.6	144.0
Unscheduled:	8.4	336.0

Schedule Leave Days page

Weekly Template	Enter the number of hours for each day in the schedule.
Repeat Template From...Through	Enter the begin and end dates during which you want the schedule to repeat. The leave request’s scheduled Begin and Return dates are the defaults.

Repeat Template For

Choose a time period for the schedule to repeat. If you choose an option other than *Every Week*, you can plan the intervening weeks with separate rounds of scheduling.

For example, if you have an employee with four weeks of FMLA leave, you can schedule the first and third weeks with one Schedule Leave Days Template that repeats for every other week and starts on the first day of the first week. You can then schedule the second and fourth weeks with another template.

Entitlement

Weeks and hours of FMLA leave that the employee is entitled to.

Scheduled

FMLA leave hours currently scheduled for the employee.

Unscheduled

FMLA leave weeks and hours remaining to the employee. This value can be negative if more hours are scheduled than are available to the employee.

Designating Paid Leave Days for Repeating Schedules

Access the Mark Paid Leave page.

Mark Paid Leave

Summary of Paid Leave Accrued

Customize | Find | View All | 

First  1 of 1  Last

Plan Type		Accrual Date	Hours Accrued
50	Sick	03/12/2000	2.000000

Mark first ☐

scheduled days (Hrs) as Paid Leave.

OK

Cancel

Mark Paid Leave page

Summary of Paid Leave Accrued

Displays the various leave plan types and the hours accrued by the employee.

The accrual date is current as of, and based on, the date when the employee’s FMLA leave request was submitted, which means that the Hours Accrued values may be inaccurate by the begin date of the leave.

Mark first . . . scheduled days (. . . Hrs) as Paid Leave

Enter the number of days to treat as part of the employee’s paid leave.

The system assumes that the paid leave days are substituted only for the beginning of the leave.

Only whole 8-hour days can be marked as paid leave days. The number of scheduled hours represented by those days can be compared with the leave accrual balances, which are always calculated as hours. When you enter a certain number of days into this field, the number of hours they represent appear in the (. . . Hrs) box.

When you return to the History page, days selected as paid leave days have their check boxes selected.

Tracking FMLA Activity

You can record significant events that affect FMLA leaves, such as employee inquiries, requests for extensions, and the sending and receiving of notices and medical documents. This information is for reference only; it does not affect processing.

Page Used to Track FMLA Activity

Page Name	Object Name	Navigation	Usage
Activity	FMLA_LV_ACTIVITY	- Benefits, Track FMLA (Family Medical Lv), Request/Authorize/Track Leave - Click the Activity tab.	Log events that affect an FMLA leave.

Tracking Activity

Access the Activity page.

Request | Eligibility | History | **Activity**

Santos, Antonio Employee EmpID: KU0010

Request Find | View All First 1 of 1 Last

Request ID: 001 Begin Date: 03/15/2000 Return Date: 07/15/2000
Reason: EI *Status: E

Leave Summary

Scheduled:	Weeks: 3.6	Hours: 144.0
Taken Today:	Weeks: 3.6	Hours: 144.0

Entitlement Summary

As of Leave Begin:	Weeks: 12.0	Hours: 480.0
Remaining Today:	Weeks: 8.4	Hours: 336.0

Activity Find | View All First 1-3 of 3 Last

*Activity Date	*Activity Type	Follow Up Required	Long Description
05/15/2000	MedCertif	☒	Requested confirmation of ongoing treatments
03/01/2000	MedCertif	☐	Requested physician's certification of E's treatment plan. Rcvd: 03/15/2000
03/01/2000	NOL Sent	☐	

Activity page

Activity Date and Activity Type

More than one activity type can occur on the same date, but only one type can be entered per record.

You can add or change activity types with the PeopleTools Data Designer.

Follow Up Required

Select if the activity you're entering requires follow-up action (as in the case of requests for medical certification, for example).

Note. This is informational. You can create queries against this field to report upcoming events.

CHAPTER 13

Managing Leave Plans

This chapter provides an overview of the leave process and discusses how to:

- Process leave accruals.
- View employee balances.

Understanding the Leave Process

The purpose of leave accrual processing is to maintain employee leave balances. When you initiate leave accrual processing, the system calculates the leave accrual award and the resulting leave balance.

In order to properly process leave accruals, the system needs to obtain information from your payroll system, including hours taken, hours adjusted, hours bought, hours sold, and service hours for each employee involved in the process. If your organization implements PeopleSoft Payroll, the system gets this information from PeopleSoft Payroll during the normal run of the process.

The system processes leave accruals depending on how you define your leave accrual plans. You can base how you want employees to earn leave on one of two things: the length of the service they've provided to your organization or the total number of hours they've worked.

You can accrue leave based on *length of service* without using payroll data because the system refers to the Employment Data Table for each employee's service date. However, if you're planning to accrue leave based on *service hours*, your system needs to obtain data from your payroll application in order to find out how many hours a particular employee has worked.

See Also

[Chapter 4, "Setting Up Benefit Plans," Setting Up Leave Plans, page 61](#)

[Chapter 14, "Managing Vacation Buy/Sell Plans," page 195](#)

Processing Leave Accruals

To process leave accruals:

1. Set up operating parameters for an accrual cycle on the Leave Accrual Process run control page.
2. Run the Leave Accrual process with the PeopleSoft Process Scheduler.

Pages Used to Process Leave Accruals

Page Name	Object Name	Navigation	Usage
Leave Accrual Proc (leave accrual process)	RUNCTL_ACCRUAL	Benefits, Manage Leave Accruals, Calculate Periodic Accruals	Set up the operating parameters for an accrual cycle.

Setting Up Operating Parameters for an Accrual Cycle

Access the Leave Accrual Proc page.

Leave Accrual Proc page

Run Control ID	The system prompts you to enter an existing ID or add a new one.
Company	Enter the company that you want to process. You may leave this field blank, which means that employees in all companies will be processed for the specified plan type and benefit plan.
Plan Type and Benefit Plan	Enter the plan type and benefit plan that you want to process.
Last Process Date	Displays the date that you last ran the Leave Accrual process for this plan type and benefit plan.
Accrual Process Date	Date upon which you want the leave accrual calculations to be based. The system will automatically set the accrual process date to the current date, but you can change it as long as the date that you enter is later than the last process date. Process leave accruals for a given company, plan type, and benefit plan a maximum of once per accrual process date and a minimum of once per the Award Frequency that you've defined on the Leave Plan Table. The leave accrued will be awarded only once per the Award Frequency for each employee participating in the plan as of the accrual process date, but all other leave processing—the maintenance of the leave taken,

leave adjusted, leave bought, and leave sold balances—will take place each time that you run the Leave Accrual process.

Note. The Leave Accrual process will process all employees who are currently enrolled in the selected plan type and benefit plan. It does not check the employment status of the employee.

For example, suppose your leave balance available is 10 hours, your unprocessed leave taken is 8 hours, your Award Frequency is *First Run of Month*, your Last Process Date is *11/1/96*, and you run the Leave Accrual process with an Accrual Process Date of *11/15/96*. In this case, no leave will be awarded but the unprocessed leave taken will be moved from unprocessed data to the leave accrual balances and the resulting leave balance available will be 2 hours.

Run

Click to run this request. PeopleSoft Process Scheduler runs the leave accrual process at user-defined intervals.

Viewing Employee Balances

View the results of leave accrual processing for an employee using the Leave Accrual page. You have the option to print a report. Employees can also view their leave balances through ePay or the HRMS Portal Pack.

See Also

PeopleSoft 8.8 ePay PeopleBook

PeopleSoft 8.8 HRMS Portal Pack PeopleBook

Page Used to View Employee Balances

Page Name	Object Name	Navigation	Usage
Leave Accrual Balances	LEAVE_ACCRUALS	Benefits, Manage Leave Accruals, Review Accrual Balances	View employee leave balances.

Viewing Employee Balances

Access the Leave Accrual Balances page.

Leave Accrual Balances	
Santos, Antonio	ID: KU0010
Leave Accruals Find View All First 1 of 12 Last	
Company: GBI Global Business Institute Plan Type: Sick Accrual Date: 04/30/2000	Benefit Program: KU1 GBI US Fulltime Benefit Pgm Currency: USD
Accrual Balances - Hours Carried over from previous year: Earned Year-to-Date: 40.000000 Taken Year-to-Date: 32.000 Adjusted Year-to-Date: Bought Year-to-Date: Sold Year-to-Date:	Service Data Service Date: 09/12/1997 Service Hours:
Accrual Totals Hours Balance: 8.000000 Hours Value: 71.20	Unprocessed Data Hours Taken: Hours Adjusted: Hours Bought: Hours Sold: Service Hours:

Leave Accrual Balances

Accrual Date Last date that you initiated a leave accrual for this employee.

Accrual Balances - Hours

Carried Over from previous year Updated only during the first run of the year.

Earned Year-to-Date Maintains the accrued leave awarded and is updated only once per Award Frequency. If you find that you need to modify the earned year-to-date balance, use the Earnings Code that you defined to adjust the accrual balance on Earnings Table 4.

Taken Year-to-Date, Adjusted Year-to-Date, Bought Year-to-Date, and Sold Year-to-Date Updated each time the Leave Accrual process is run and values are moved from the corresponding *Unprocessed Data* fields.

Accrual Totals

Hours Value Current monetary value of the hours balance.

The system calculates the hours value, or value of the unused hours, by multiplying the leave balance by the current hourly rate for hourly employees or the hourly equivalent for salaried employees.

Hours Balance Employee's current accrued time available.

The system calculates the Hours Balance by totalling:

Carried Over from Previous Year +
 Earned Year-to-Date -

Taken Year-to-Date +
 Adjusted Year-to-Date +
 Bought Year-to-Date -
 Sold Year-to-Date -
 Unprocessed Hours Taken +
 Unprocessed Hours Adjusted +
 Unprocessed Hours Bought -
 Unprocessed Hours Sold.

Service Data

Service Date	Date used for length of service calculations when the Service Unit is defined as <i>Months</i> .
Service Hours	Number of hours used for length-of-service calculations when the Service Unit is defined as <i>Hours</i> .

Unprocessed Data

Displays the hours that you have *not* yet processed using the accrual process. These are hours passed from the PeopleSoft Payroll Pay Confirmation process since the accrual date.

Hours Taken, Hours Adjusted, Hours Bought, and Hours Sold	Updated each time the Pay Confirmation process is run.
Service Hours	The Pay Confirmation process will only update the service hours when the employee is participating in the leave plan as of the Pay End Date.

See Also

Chapter 4, “Setting Up Benefit Plans,” page 45

CHAPTER 14

Managing Vacation Buy/Sell Plans

This chapter provides an overview of vacation buy/sell plans and describes how to review vacation buy/sell calculation results.

Understanding the Vacation Buy/Sell Process

This section outlines the vacation buy/sell process, which enables employees to buy or sell vacation time.

To process vacation buy/sell earnings:

1. Enroll eligible employees into vacation buy/sell benefit plans using the Vacation Benefit Table and enter their vacation buy and sell elections.

Employees normally elect to buy or sell vacation once at the beginning of the plan year. When an employee buys vacation, your PeopleSoft Human Resources system spreads the cost over the plan year, deducting from employee pay based on the frequency that you define on the Deduction Table. The same is true for vacation sell. The system refunds the money over the plan year according to the frequency that you define.

2. Use PeopleSoft Payroll for North America during the first payroll cycle of the plan year to calculate the effect of the buy or sell transaction on the employee's leave balance.
3. Run the Leave Accrual process, which updates employee leave balances with the results of the buy or sell transaction.

Working With Mid-Year Buy or Sell Transactions

In PeopleSoft Human Resources Base Benefits, if an employee elects to enroll in a Vacation Buy/Sell plan at a time other than the beginning of the plan year, you will have to calculate the buy or sell amount to be deducted from or added to employee pay, spread out over the remainder of the plan year. Enter this amount in the Vacation Benefit page.

In PeopleSoft Benefits Administration, the system calculates the per-pay-period amount based on the beginning of the plan year. If an employee buys or sells vacation at another time, you need to calculate the buy or sell amount to be deducted from or added to employee pay, spread out over the remainder of the plan year. Then override the amount calculated by the system on the Vacation Benefit page.

See Also

Chapter 4, “Setting Up Benefit Plans,” Setting Up Vacation Buy/Sell Plans, page 73

Chapter 3, “Setting Up Core Human Resources Base Benefits Tables,” Setting Up Deduction Codes, page 33

PeopleSoft 8.8 Benefits Administration PeopleBook, “Running the PeopleSoft Benefits Administration Process,” Using Open Enrollment

Chapter 3, “Setting Up Core Human Resources Base Benefits Tables,” Setting Up Deduction Codes, page 33

Reviewing Vacation Buy/Sell Calculation Results

This section describes how to:

- Determine Leave Accrual processing status.
- View the number of vacation hours bought or sold.

See Also

Chapter 8, “Enrolling Participants,” Reviewing Employee Eligibility, page 119

Page Used to Review Vacation Buy/Sell Calculation Results

Page Name	Object Name	Navigation	Usage
Vacation Benefit	VACATION_BENEFIT	Benefits, Enroll In Benefits, Vacation Benefits	Review leave accrual processing status for a specific employee.

Determining Leave Accrual Processing Status

Access the Vacation Benefit page.

Vacation Benefit	
Santos, Antonio	ID: KU0010
Plan Type Find View All First 1 of 1 Last Plan Type: 90 Vacation Buy	
Coverage Find View All First 1 of 1 Last *Deduction Begin Date: 01/01/2000 Coverage Election: ☒ Elect ☐ Waive ☐ Terminate *Election Date: 06/23/2000 Benefit Program: GBI US Fulltime Benefit Pgm Benefit Plan: KUVCBY Vacation Buy Option Code: 1 Vacation Hours: 8.00 Vacation Buy or Sell: Vacn Buy Buy/Sell Flat Amounts: 5.93 Monthly Goal Amount: 71.20 Goal Balance: 24.66 Employee Status: Active ☒ Vacation Accrual Processed	

Vacation Benefit page

When you enroll an employee, the system clears the Vacation Accrual Processed check box. Vacation Accrual Processed becomes selected after payroll has been processed for the employee and the Leave Accrual process has been run.

Viewing the Number of Vacation Hours Bought or Sold

During the first payroll run for the employee after enrollment, PeopleSoft Payroll for North America creates Other Earnings data for the total vacation bought or sold hours. This data is used for accrual purposes.

You can view the Other Earnings data on the employee's paysheet, in the Manage Payroll Process page. For example, if an employee sells 10 hours of vacation, PeopleSoft Payroll for North America creates Other Earnings data to reflect the 10 hours, using the earnings code that you defined in the Vacation Buy/Sell Table for the vacation sell benefit plan.

Note. You can also see the total number of hours bought and sold using the Benefits Summary page.

See Also

PeopleSoft 8.8 Payroll for North America PeopleBook, "Working With Paysheets"

CHAPTER 15

Managing Benefits Billing

This chapter provides an overview of Benefits Billing and Billing Calculations and describes how to:

- Enroll participants.
- Calculate charges.
- Review charges.
- Generate Benefits Billing statements.
- Process payments.
- Adjust charges and payments.
- Review charge and payment history.

Understanding Benefits Billing

You use Benefits Billing to process billing for employees and dependents who are charged directly for benefit plan elections instead of paying through payroll deductions. Benefits Billing can be used for either regular benefits or COBRA benefits.

Understanding the Billing Calculation Process

The Billing Calculation process creates Billing Charge records for a selected billing calendar. Each Billing Charge record contains charge information for an individual plan type/billing period combination.

The system queries the Base Benefits business process tables to determine the coverage in effect for the plan type as of the end date of the billing calendar. It passes the coverage code and other relevant data to the Deduction Calculation (DedCalc) programs. The DedCalc programs calculate the billing amount using normal rules, which the billing system then modifies based on the rate qualifier.

Rerunning the Billing Calculation Process

Just as in PeopleSoft Payroll for North America, you can rerun billing calculations repeatedly for a given billing calendar until you print billing statements for that calendar. The system backs out any previously calculated charges as well as any open credit that it applied previously to the charges.

The system cannot reprocess charges for a billing calendar if you have made adjustments to the charges or have applied payments.

Retroactive Processing

When retroactive processing is called for, the Billing Calculation process compares:

- Billing calendar dates.
- The date billing begins for the plan type.
- The dates of any charge records for the plan type.

The system then generates retroactive Billing Charge records for all previous billing periods that:

- Have passed since the billing begin date.
- Do not have Billing Charge records.

Billing Calculation Limitations

The Billing Calculation process calculates payments based on employee enrollments in Base Benefits tables and the rates specified in benefit programs. The Billing Calculation process does not:

- Include any offset from credits when calculating deductions.
Enter flat amounts into Billing Enrollment records to simulate the use of credits.
- Calculate imputed income or any other taxable/nontaxable benefit calculations.

The process only calculates before-tax and after-tax deduction classifications.

- Bill benefit programs, leave plans, and vacation buy/sell plans (plan types 01, 5x, and 9x).
- Update any deduction or other payroll balances.

You have to do this manually. Not making these adjustments can affect imputed income reporting, savings plan limit testing, and FSA claims processing.

- Check group limits on life and AD/D insurance plans.

The Billing Calculation process only bills flat dollar amounts for savings plans, FSA plans, retirement plans, and pension plans (plan types 4x, 6x, 7x, and 8x).

Prerequisite

Before you begin using the Benefits Billing feature, set up the rules for benefits billing.

See Also

[Chapter 6, “Setting Up Additional Human Resources Base Benefits Features,”
Setting Up Benefits Billing, page 93](#)

[Chapter 3, “Setting Up Core Human Resources Base Benefits Tables,” page 13](#)

Enrolling Participants

This section describes how to:

- Locate eligible participants.
- Automatically enroll participants.
- Manually enroll participants.
- Override Benefits Billing parameters for individual enrollees.

Pages Used to Enroll Participants

Page Name	Object Name	Navigation	Usage
Benefits Billing Enrollment	BILL_ENROLL	Benefits, Benefits Billing, Manage Acc Status and Balance, Enroll in Billing	Manually enroll employees into the Benefits Billing system and update previous enrollments.
Billing Override	BILL_EMPL_PARM	Benefits, Benefits Billing, Manage Acc Status and Balance, Request Hold/Alternate Address	Override Benefit Billing parameters at the individual enrollee level. Set up comments, designate an alternate address, or hold statements for an individual enrollee.

Locating Eligible Participants

A typical Benefits Billing population might include:

- Employees on leave without pay.
- Employees on reduced schedules who do not earn enough to pay for coverage.
- Retirees who continue company-sponsored coverage.
- Terminated employees enrolled in COBRA.
- Dependents of employees enrolled in COBRA.
- Survivors of deceased employees and retirees.

Note. Dependents of active employees cannot be billed through Benefits Billing. Only dependents who have been given a “non-employee” status through COBRA processing or some other means can be enrolled in Benefits Billing.

Automatically Enrolling Participants

If you currently implement PeopleSoft Benefits Administration, you can use Event Maintenance processes to locate employees and dependents who are eligible for Benefits Billing and enroll them into the Benefits Billing system.

You can also use COBRA Administration processes to locate and enroll COBRA participants who are eligible for Benefits Billing.

See Also

PeopleSoft 8.8 Benefits Administration PeopleBook, “Creating Event Rules”

Manually Enrolling Participants

Access the Benefits Billing Enrollment page.

The screenshot displays the 'Benefits Billing Enrollment' page. At the top, the user 'Santos, Antonio' is logged in. The employee ID is 'KU0010' and the enrollment record number is '0'. The page is divided into three main sections: 'Billing Enrollment Details', 'COBRA Details', and 'Deduction Calculation per Billing Period'. The 'Billing Enrollment Details' section has a 'Plan Type' field. The 'COBRA Details' section has a 'COBRA Event ID' field. The 'Deduction Calculation per Billing Period' section has fields for 'Effective Date' (11/18/2002), 'Event Identification', 'Billing Status' (Active), 'Billing Reason' (Manual), and a checkbox for 'Percent Calculation' (checked) with a value of '0' and a dropdown for 'Employee Rate', plus a 'Flat Amount of' field with a value of '0.00'.

Benefits Billing Enrollment page

Employee ID

When you first enter the Benefits Billing Enrollment page, you are prompted for the ID of the employee that you want to enroll or update.

You cannot create Benefits Billing enrollment records that cover all of an employee's multiple jobs at once.

Plan Type

You can enter multiple plan types, including:

- Simultaneous active and COBRA billing enrollments.
- Multiple COBRA billing enrollments.

COBRA Event ID

Automatically assigned by the COBRA batch process, but can also be entered. Should be 0 for non-COBRA billing.

Effective Date

You can have multiple effective-dated billing records for COBRA and non-COBRA events.

Event Identification

For records created through Benefits Administration processes only. Indicates that the record was created through Event Maintenance or Open Enrollment.

Billing Status

Controls billing calculations for each plan type:

Active: You are billing the employee for this plan type.

Hold Billing: Charges are not calculated for this plan type. If you change the status to *Active* after *Hold Billing* has been in effect, the system retroactively calculates charges the next time that you run the Benefits Billing calculation process. While *Hold Billing* is selected for a particular plan type, the system continues to bill for other plan types and continues to produce statements.

Inactive: You are no longer billing for this plan type.

Billing Reason

Identifies the source of the billing entry and the reason that the employee is being billed; for reference only.

Manual: Indicates you are entering the billing enrollment record manually.

Arrears: Indicates the participant cannot gross enough to cover deductions.

If the system has automatically enrolled the employee or dependent into Benefits Billing through Benefits Administration or COBRA batch processes, the system selects either Benefits Administration or COBRA to identify the process by which this enrollment record was entered into the system.

Percent Calculation and Flat Amount

Determines how to modify the deduction calculation for billing purposes.

Select Percent Calculation to use the system deduction calculation routines with either the normal *Employee Rate* or the *Total Rate* to calculate the amount owed for each billing period. The system then multiplies the calculated value by the percentage entered. The percentage can be more than 100 percent.

Select Flat Amount to add a dollar amount to the amount calculated by the Percent Calculation settings. If the Percent Calculation check box is cleared, the system bills the employee the flat amount for each billing period. The amount can be a negative number.

See Also

Chapter 3, “Setting Up Core Human Resources Base Benefits Tables,” Setting Up Calculation Rules, page 26

Overriding Benefits Billing Parameters for Individual Enrollees

Access the Billing Override page.

Effective Date

You can enter more than one set of override parameters per employee and order them by effective date.

Hold Billing

Select to halt billing for all plan types.

When you hold billing and run the Benefits Billing calculation process, the system retroactively calculates charges that occurred during the period that the hold was in effect.

Hold Statements

Select to stop printing billing statements for this employee.

Address Information

Enter an alternate address to send upcoming billing statements.

The default address is on the enrollee’s Personal Data record.

Comments

Enter comments to be printed on upcoming billing statements for this employee.

Calculating Charges

This section describes how to:

- Automatically calculate charges.
- Manually calculate charges for individual participants.

Pages Used to Calculate Charges

Page Name	Object Name	Navigation	Usage
Billing Run Ctl (billing run control)	BILL_RUNCTL	Benefits, Benefits Billing, Calculate and Review Charges, Calculate Periodic Charges	Calculate charges and create Billing Charge records for a selected billing calendar.
Manual Charge	BILL_CHRG_ADD	Benefits, Benefits Billing, Calculate and Review Charges, Enter Manual Charges	Manually post new Billing Charge records to the system.

Automatically Calculating Charges

Access the Billing RuncCntl page.

Billing Period

Select the period that indicates the billing calendar for which you want to calculate benefits billing charges.

Note. You can rerun the Billing Calculation process until you run the Statement Print process for that billing period.

Payment Due and COBRA Payment Due

Automatically populated with the dates that were defined for this billing calendar. May be modified if necessary.

Manually Calculating Charges for Individual Participants

Access the Manual Charge page.

Manual Charge			
Manual Charge Entry			
*EmpID:	KU0010	Santos, Antonio	
*Billing Period:	2002	02/01/2000 to 02/29/2000	Empl Rcd#: 0
*Plan Type:	10	Medical	CBR Ext ID:
Benefit Program:	B04	BAS Elig 4	Coverage Code: 1 Employee Only
Benefit Plan:	BP0201	TMED	Deduction Code: B10-18 Med Deduct
		*Sales Tax:	None
*Date Due:	02/26/2000		
Date Overdue:	03/02/2000		
Billing Reason:	Arrears	Billing Source:	Manual
		Date Entered:	11/18/2002
Charge:	0.00		
			Save and Add Next

Manual Charge page

You might use this page to enter a partial charge for an employee's first billing period and start automatic billing for that employee in the next billing period. You can also use this page to enter a partial month billing for the last billing period.

If you enter a Billing Charge record manually for an employee, the Billing Calculation process does *not* automatically calculate the same billing period's charges for that employee. The Billing Calculation process never deletes manual charge entries, even when the process is rerun for a particular billing period.

EmplID (employee ID) Enter the ID of the employee to billed.

Billing Period Select the billing period from the Billing Calendar.

Plan Type Determine the plan type.

(CAN) Sales Tax Canadian users can enter charges that represent various Canadian sales taxes associated with another benefits charge.

For example, a billing charge for a medical plan may have a Canadian sales tax associated with it. You enter this tax as a separate charge and identify the type of sales tax here.

This field can be used for the Goods and Services Tax (GST), the Provincial Sales Tax (PST), the Provincial Premium Tax (PPT), the Provincial Sales Tax on Insurance (PSTI), and the Harmonized Sales Tax (HST).

Note. You always enter sales tax as a separate charge, as this is the only way that the system can track it. On all Benefits Billing pages dealing with benefits charges, sales tax charges are identified with their sales tax type.

Charge

Enter the total charge for this employee and billing period.

Note. Once you save a Charge Entry record, you cannot directly change the amount of that charge. Any changes must be made through the Bill Charge Adjustment page.

Reviewing Charges

This section describes how to:

- Review individual charge records.
- Review charge details.
- Review charges by billing period.
- Review charges by plan type.

Pages Used to Review Charges

Page Name	Object Name	Navigation	Usage
Charge	BILL_CHRG_VW	Benefits, Benefits Billing, Calculate and Review Charges, Review Charge Details	See how Benefits Billing charges and payments add up for a selected employee.
Charge Detail	BILL_CHRG_DET	• Benefits, Benefits Billing, Calculate and Review Charges, Review Charge Details • Click the Charge Details tab.	View details of charge actions.
Charge Summary	BILL_CSUM_BY_BPER	Benefits, Benefits Billing, Calculate and Review Charges, Rvw Charge Smry by Bill Period	Arranges a participant's charges by billing period.
Smmry byPlantype (summary by plan type)	BILL_CSUM_BY_PTYPE	Benefits, Benefits Billing, Calculate and Review Charges, Rvw Charge Smry by Plan Type	Arranges a participant's charges by plan type.

Reviewing Individual Charge Records

Access the Charge page.

Charge		Charge Detail																			
Lopez,Daisy		Employee																			
		EmplID: KU0013																			
Billing Period:	2001 01/01/2000 to 01/31/2000	Empl Rcd#:	0																		
Plan Type:	22 AD/D	Charge ID:	5																		
Benefit Program:	KU1 GBI US FT	Coverage Code:																			
Benefit Plan:	KUAD25 ADD 25K	Deduction Code:	KUAD99 AD&D Flat																		
*Date Due:	01/26/2000	<table border="1"> <tbody> <tr> <td>Charge:</td> <td></td> <td>2.00</td> </tr> <tr> <td>Charge Adjustments:</td> <td>(+)</td> <td>0.00</td> </tr> <tr> <td>Total Charge:</td> <td>(=)</td> <td>2.00</td> </tr> <tr> <td>Payment:</td> <td>(-)</td> <td>0.00</td> </tr> <tr> <td>Payment Adjustments:</td> <td>(+)</td> <td>0.00</td> </tr> <tr> <td>Amount Due:</td> <td>(=)</td> <td>2.00</td> </tr> </tbody> </table>		Charge:		2.00	Charge Adjustments:	(+)	0.00	Total Charge:	(=)	2.00	Payment:	(-)	0.00	Payment Adjustments:	(+)	0.00	Amount Due:	(=)	2.00
Charge:				2.00																	
Charge Adjustments:	(+)			0.00																	
Total Charge:	(=)			2.00																	
Payment:	(-)			0.00																	
Payment Adjustments:	(+)			0.00																	
Amount Due:	(=)	2.00																			
Date Overdue:	01/31/2000																				
Billing Reason:	Manual																				
Billing Source:	Automated																				
Date Entered:	07/21/2000																				
Print Period:																					

Charge page

Charge ID

A system-generated number that ensures the uniqueness of Billing Charge records.

CBR Evt ID (COBRA event ID)

If this coverage is calculated under COBRA, provides a link to the COBRA event.

Benefit Program, Coverage Code, Benefit Plan, and Deduction Code

Obtained from the participant's Base Benefits records.

Can be used to trace back to the rate tables and calculation rules that created the charge.

(CAN) Sales Tax

Appears if the charge is for Canadian sales tax associated with another benefits charge.

Date Due and Date Overdue

You can modify these dates.

Print Period

Indicates the begin and end dates of the Billing Calendar during which the statement for this charge was sent.

Charge

Original charge calculated by the batch calculation process or entered in the Charge Entry page.

Charge Adjustments

From the Charge Adjustment page.

Payment Adjustments

From the Payment Adjustment page.

Note. Participants who are billed for more than one billing period, or who are billed for more than one plan type, employee record number, or COBRA event within a particular billing period, have multiple Billing Charge records.

Reviewing Charge Details

Access the Charge Detail page.

Charge		Charge Detail																						
Lopez,Daisy		Employee																						
		EmplID: KU0013																						
Billing Period:	2001 01/01/2000 to 01/31/2000	Empl Rcd#:	0																					
Plan Type:	22 AD/D	Charge ID:	5																					
Charge:	2.00	Charge Adjustments:	0.00																					
Payment:	0.00	Payment Adjustments:	0.00																					
		Total Charge:	2.00																					
		Amount Due:	2.00																					
<table border="1"> <thead> <tr> <th colspan="2">Bill Details</th> <th colspan="2">Customize Find View All </th> <th>First</th> <th>1 of 1</th> <th>Last</th> </tr> <tr> <th>Posting Date</th> <th>Action Type</th> <th>Charge</th> <th>Charge Adjustments</th> <th>Payment</th> <th>Payment Adjustments</th> <th></th> </tr> </thead> <tbody> <tr> <td>01/31/2000</td> <td>Charge</td> <td>2.00</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Bill Details		Customize Find View All 		First	1 of 1	Last	Posting Date	Action Type	Charge	Charge Adjustments	Payment	Payment Adjustments		01/31/2000	Charge	2.00				
Bill Details		Customize Find View All 		First	1 of 1	Last																		
Posting Date	Action Type	Charge	Charge Adjustments	Payment	Payment Adjustments																			
01/31/2000	Charge	2.00																						

Charge Detail page

Posting Date

Displays the dates that actions were entered into the system.

For detail records with an Action Type of *Charge*, the posting date is the last day of the billing cycle.

Action Type

Possible actions include *Charge*, *Charge Adjustment*, *Payment*, and *Payment Adjustment*.

Charge

Amount of the original charge. If the charge is associated with a Canadian sales tax, the sales tax type (GST, PST, PSTI, and so on) is indicated as well.

Reviewing Charges by Billing Period

Access the Charge Summary page.

Charge Summary

Lopez,DaisyEmployeeEmplID: KU0013

Billing Period: 2001 01/01/2000 to 01/31/2000Empl Rcd#: 0

Charge Summary by Bill Period							
Plan Type	Plan Type	Charge ID	COBRA Event ID		Original Charge	Adjustment	Total Charge
10	Medical	1		None	123.00	0.00	123.00
11	Dental	2		None	26.00	0.00	26.00
20	Life	3		None	32.50	0.00	32.50
21	Supplemental Life	4		None	6.40	0.00	6.40
22	AD/D	5		None	2.00	0.00	2.00

Charge Summary page

(CAN) If the charge is associated with a Canadian sales tax, the sales tax type (GST, PST, PSTI, and so on) is indicated before the Charge column.

Reviewing Charges by Plan Type

Access the Smmry byPlantype page.

Smmry byPlantype

Lopez,DaisyEmployeeEmplID: KU0013

Plan Type: 10 / MedicalEmpl Rcd#: 0

Charge Summary by Bill Period							
Billing Period	Begin Date	End Date	Charge ID	COBRA Event ID	Charge	Adjustment	Total Chrg
2001	01/01/2000	01/31/2000	1		123.00	0.00	123.00
2002	02/01/2000	02/29/2000	21		123.00	0.00	123.00

Smmry byPlantype page

(CAN) If the charge is associated with a Canadian sales tax, the system displays the sales tax type (GST, PST, PSTI, and so on) of the charge to the left of the charge amount.

Generating Benefits Billing Statements

This section describes how to:

- Print and reprint billing statements.
- Establish print IDs for reprinting statements.

Pages Used to Generate Benefits Billing Statements

Page Name	Object Name	Navigation	Usage
Billing Statement	RUNCTL_BEN040	Benefits, Benefits Billing, Create Statements, Print Billing Statement	Print and reprint billing statements.
Statement Print	BILL_PRINT	Benefits, Benefits Billing, Create Statements, Reprint Statement	Set up print Ids and select employees for reprinting billing statements.

Printing and Reprinting Billing Statements

Access the Billing Statement page.

Billing Statement page

Billing Period

Select from the Billing Calendar.

As Of Date

Used to determine which charges are overdue. The system totals charges with due dates prior to the As Of Date and prints the total as the amount overdue. This date has been kept separate because some organizations bill in advance for benefits.

Reprint and Print ID

If you want to reprint statements, select the Reprint check box and enter a Print ID. You define reprint report Print IDs in the Statement Print page, which we detail in the following section.

The printed statements include all plan types being billed. They do not differentiate between COBRA and non-COBRA charges, and they don't itemize the charges by an employee's different employee record numbers (if the employee has multiple jobs). The inclusion of a due date on each item allows for separate due dates for COBRA coverage.

Billing statements can also include statement comments. You can use the Billing Parameter page to create global comments that appear on the statements of all employees participating in a given Billing Calendar, and you can use the Employee Override page to compose a statement comment that appears on an individual employee's billing statement.

Note. The system only produces statements for individuals who have active billing enrollments or outstanding balances in the Benefits Billing system. The system does not print statements for employees who are inactive with a zero balance or who have *Hold Statements* selected in the Employee Override page. If a charge displayed on the statement is subject to a Canadian sales tax, the system displays the charge's sales tax type (GST, PST, PSTI, and so on) to the left of the charge amount.

Establishing Print IDs For Reprinting Statements

Access the Statement Print page.

Statement Print

Print ID: 12

***Billing Period:** 2002 02/01/2000 to 02/29/2000

Participant(s) to Print		Customize Find View All	First 1 of 1 Last
*EmpID	Name		
B-BU141	Freeman, Jill		+ -

Statement Print page

Billing Period

Select from the Billing Calendar.

EmpID (employee ID)

Select the employees for whom Billing Statements need to be reprinted.

Processing Payments

This section describes how to:

- Log payments.
- Review payment history.

Pages Used to Process Payments

Page Name	Object Name	Navigation	Usage
Payment Entry	BILL_PAYMENT	Benefits, Benefits Billing, Apply Payments, Allocate Payments to Charges	Log individual payments from a participant and allocate those payments to separate charges.
Benefits Billing Payment Review	BILL_PAYMENT_VW	Benefits, Benefits Billing, Apply Payments, Review Payments/Details	Examine charge payment history for a selected participant.
Smmry by Pst Date (summary by post date)	BILL_PSUM_BY_PTDT	Benefits, Benefits Billing, Apply Payments, Review Payments by Post Date	Review payments for a specific participant, arranged by posting date.

Logging Payments

Access the Payment Entry page.

Payment Entry

Bill Payment

*EmpID: B-BU140 Santos, Emma

*Posting Date: 11/18/2002 Posting Sequence: 1 *Form of Payment: Check

Payment: Payment ID: 4

Date Due	Period Cd	Plan Type	CBR Evt ID	Benefit Plan	Sales Tax Type	Covrg Cd	Original Charge	Amount Owed	Payment
								0.00	

Applied to Open Credit: Total Allocation: 0.00

Save and Add Next

Payment Entry page

Posting Sequence

Provided by the system. Enables you to enter multiple payments on the same day.

Form of Payment

You can enter either *Check* or *Cash* in this field, but the interface value can only be set automatically by the Billing Calculation batch process.

Payment

Enter the total payment provided by the employee. The system automatically allocates this payment to the oldest charges. You can redistribute the payment among the participant's various charges manually in the Allocations group box.

Allocation Details

This group box enables you to manually distribute the payment to the various open charges. When a charge is paid in full, it is closed by the system and does not appear the next time that you access the Payment Entry page. If, after allocation of the payment, a charge is *not* paid in full, it remains open for the next payment.

Applied to Open Credit

If payment exceeds the total amount owed, the system posts the excess payment here.

Note. The system does not allow participants to have payments applied to open credit as long as they have unpaid charges.

Note. Any changes to saved payment entries must be made through the Payment Adjustments page.

Reviewing Payment History

Access the Benefit Billing Payment Review page.

Benefit Billing Payment Review																																																					
Lopez,Daisy			Employee			EmplID: KU0013																																															
Posting Date: 07/21/2000			Posting Sequence: 1			Form of Payment: Check																																															
Entry Date: 07/21/2000			Print Period:			Payment ID: 2																																															
Payment: 150.00			Payment Adjustments: 0.00			Actual Payment: 150.00																																															
Payment Review Customize Find View All First 1 1-3 of 3 Last <table border="1"> <thead> <tr> <th>Date Due</th> <th>Billing Period</th> <th>Plan Type</th> <th>COBRA Event ID</th> <th>Benefit Plan</th> <th>Covrg Cd</th> <th>Total Charge</th> <th>Amount Due</th> <th>Total Amount Paid</th> </tr> </thead> <tbody> <tr> <td>01/26/2000</td> <td>2001</td> <td>Medical</td> <td></td> <td>HMO Plan 2</td> <td>1</td> <td>123.00</td> <td>0.00</td> <td>123.00</td> </tr> <tr> <td>01/26/2000</td> <td>2001</td> <td>Dental</td> <td></td> <td>Std Dental</td> <td>1</td> <td>26.00</td> <td>0.00</td> <td>26.00</td> </tr> <tr> <td>01/26/2000</td> <td>2001</td> <td>Life</td> <td></td> <td>Basic Life</td> <td></td> <td>32.50</td> <td>31.50</td> <td>1.00</td> </tr> <tr> <td colspan="8">Total Allocation:</td> <td>0.00</td> </tr> </tbody> </table>									Date Due	Billing Period	Plan Type	COBRA Event ID	Benefit Plan	Covrg Cd	Total Charge	Amount Due	Total Amount Paid	01/26/2000	2001	Medical		HMO Plan 2	1	123.00	0.00	123.00	01/26/2000	2001	Dental		Std Dental	1	26.00	0.00	26.00	01/26/2000	2001	Life		Basic Life		32.50	31.50	1.00	Total Allocation:								0.00
Date Due	Billing Period	Plan Type	COBRA Event ID	Benefit Plan	Covrg Cd	Total Charge	Amount Due	Total Amount Paid																																													
01/26/2000	2001	Medical		HMO Plan 2	1	123.00	0.00	123.00																																													
01/26/2000	2001	Dental		Std Dental	1	26.00	0.00	26.00																																													
01/26/2000	2001	Life		Basic Life		32.50	31.50	1.00																																													
Total Allocation:								0.00																																													

Benefit Billing Payment Review page

Posting Date

Date when the payment was actually applied to the charges.

Entry Date

Date when you entered the payment record into the system.

Print Period

The billing period during which information about this payment appeared on the participant's billing statement.

Payment

Payment amount originally entered.

Payment Adjustments

Adjustments made on the Payment Adjust page.

Actual Payment

The amount of the payment that was actually applied against charges. This value is identical to either the Payment or Payment Adjustment value, except in cases where overpayments were Applied to Open Credit.

Adjusting Charges and Payments

This section describes how to:

- Make adjustments to charges.
- Make adjustments to payments.

Pages Used to Adjust Charges and Payments

Page Name	Object Name	Navigation	Usage
Charge Adjustment	BILL_CHRG_ADJUST	Benefits, Benefits Billing, Make Adjustments, Adjust Charges	Adjust charges on existing Billing Charge records.
Payment Adjust (payment adjustment)	BILL_PAY_ADJUST	Benefits, Benefits Billing, Make Adjustments, Adjust Payments	Adjust payments to existing Billing Payment records.
Adjustm. Summary (adjustment summary)	BILL_ADJ_SMRY	Benefits, Benefits Billing, Make Adjustments, Review Adjustment Summary	View a summary of all adjustments for a participant.

Making Adjustments to Charges

Access the Charge Adjustment page.

Charge Adjustment

Lopez,DaisyEmployeeEmplID: KU0013

Charge Adjustments

Find | View AllFirst1 of 1Last

Billing Period:200303/01/2000to03/31/2000Empl Rcd#:0

Plan Type:10MedicalCBR Evt ID:

Charge:123.00Charge Adjustments:0.00

Payment:0.00Payment Adjustments:0.00Net:123.00

Adjustment Details

Customize | FindFirst1 of 1Last

Posting Date	Action Type	Charge Amount	Charge Adjustments	Payment Amount	Pmt Adjust
04/30/2000	Charge	123.00			

Post Date:11/20/2002Adjustment Description:

Post Seq:1

Adj Amt:0.00

Charge Adjustment page

You can only apply one charge adjustment at a time.

Post Date	Automatically set to today's date, but you can change it.
Post Seq (post sequence)	Assigned by the system. Enables you to schedule more than one charge adjustment for a particular post period.
Adj Amt (adjustment amount)	Enter the amount of the adjustment. If you increase the charge, the system checks to see if the participant has any overpayments allocated to open credits. It applies open credits to the increase in the charge, updates the charge balance, and inserts detail rows showing the allocation of the open credits to the charge. If you reduce a charge that has already been paid, you end up with an overpayment. The system checks to see if the employee has other open charges. If there are open charges, the system requests that you make a payment adjustment. If there are no open charges, the system selects a payment allocated to the charge being adjusted and automatically creates a payment adjustment that reduces the payment. The system then increases the open credit balance by the amount by which the payment was reduced.
Adjustment Description	Enter the reason for the adjustment.

Making Adjustments to Payments

Access the Payment Adjust page.

Payment Adjust

Lopez,Daisy

Employee

EmplID: KU0013

Posting Date: 07/21/2000

Posting Sequence: 1

Form of Payment: Check

Entry Date: 07/21/2000

Print Period:

Payment ID: 2

Payment: 150.00

Payment Adjustments: 0.00

Total Payment: 150.00

Post Date: 11/18/2002

Adjustment Description:

Post Seq: 1

Payment Change: 0.00

Net Adjustment: 0.00

Adjustment Distribution

Customize | Find | View All

First 1-4 of 20 Last

Date Due	Billing Period	Plan Type	COBRA Event ID	Benefit Plan	Covrg Cd	Amount Due	Amount Paid	Payment Adjustments		
01/26/2000	2001	Medical		KUHMO2	HMO Plan 2	1	0.00	123.00		+ -
01/26/2000	2001	Dental		KUDEN1	Std Dental	1	0.00	26.00		+ -
01/26/2000	2001	Life		KUBLIF	Basic Life		31.50	1.00		+ -
01/26/2000	2001	Supp Life		KUSL1X	1x Salary		6.40	0.00		+ -

Net Adjustment Allocated: 0.00

Payment Adjust page

Payment Adjustments	Distribute the total adjustment among the charges.
Post Date	Automatically set to today's date, but you can change it.

Post Seq (post sequence)	Assigned by the system. Enables you to schedule more than one charge adjustment for a particular post period.
Payment Change	Enter the total adjustment.
Net Adjustment	The net adjustment is equal to the payment change if the adjustment increases the payment or if there is no open credit associated with the payment. If the payment adjustment reduces the payment or there is an open credit, the Net Adjustment field represents the amount left over when the open credit has been wiped out, which then has to be subtracted from charges. The system requires that the Net Adjustment field equal the Net Adjustment Allocated field, except when the total adjustment exceeds the total due on charges. In this case, as with payments, the system requires that all the charges are paid off, and it applies the remainder to open credit.
Adjustment Distribution	You can redistribute the payment to other charges through the adjustment.

Reviewing Charge and Payment History

You can view a history of all payments, charges, and remaining balances for an employee.

Page Used to Review Charge and Payment History

Page Name	Object Name	Navigation	Usage
Employee Billing	BILL_BLNC_SMRY	Benefits, Benefits Billing, Manage Acc Status and Balance, Review Employee Balances	View charges, payments, and grand totals associated with an individual employee.

Reviewing Employee Billing History

Access the Employee Billing page.

Employee Billing

Lopez,Daisy

Employee

EmplID: KU0013

Employee Balance Review

Customize | Find | View All |  First 1-10 of 20 Last

Billing Period		Plan Type	Total Charge	Total Payment	Net
2001	10	Medical	123.00	123.00	0.00
2001	11	Dental	26.00	26.00	0.00
2001	20	Life	32.50	1.00	31.50
2001	21	Supplemental Life	6.40	0.00	6.40
2001	22	AD/D	2.00	0.00	2.00
2002	10	Medical	123.00	0.00	123.00
2002	11	Dental	26.00	0.00	26.00
2002	20	Life	32.50	0.00	32.50
2002	21	Supplemental Life	6.40	0.00	6.40
2002	22	AD/D	2.00	0.00	2.00

Grand Total:

759.60

150.00

609.60

Employee Billing page

The charge and payment values displayed are accounted for in all adjustments previously posted against them. The Net column displays the balance still outstanding for each charge/payment combination.

Note. Canadian sales tax types (GST, PST, PSTI, and so on) are displayed the left of the charge listing when appropriate.

The grand total adds the Total Charge, Total Payment, and Net columns.

CHAPTER 16

Managing COBRA

This chapter provides an overview of managing COBRA and discusses how to:

- Determine qualified COBRA events.
- Run the COBRA process.
- Create notification letters.
- Enter COBRA elections and waivers.
- Process enrollments for secondary events.
- Manage COBRA events.
- Manage COBRA benefit plan and dependent information.
- Manage non-employee COBRA participants.
- Terminate COBRA coverage.
- Manually enroll participants in COBRA coverage.

Understanding COBRA Management

The system searches the database for COBRA qualifying events that you define and identifies those employees and dependents who are eligible for COBRA benefits. Once these qualified beneficiaries are identified, you can retrieve data through the COBRA pages and track the qualifying event, the calculated coverage begin and end dates, and COBRA status for each beneficiary. You can also enter health and FSA benefit elections.

To administer COBRA:

1. Perform PeopleSoft Human Resources functions as usual.
For example, terminate employees, retire employees, and record marital status changes. These functions trigger COBRA activity.
2. Run the COBRA process to identify qualifying events and beneficiaries.
3. Generate COBRA notification letters and enrollment forms.
4. Enter COBRA elections or coverage waivers.
5. Manage COBRA benefits for non-employee COBRA beneficiaries and their dependents.
6. Terminate COBRA enrollment for beneficiaries who lose their coverage due to lack of payment or voluntary termination.

Determining Qualified COBRA Events

This section explains:

- What COBRA events are.
- How to add, change, delete, and review COBRA events.

Understanding COBRA Events

A qualified COBRA event:

- Is defined in the COBRA Event Rules Table.
- Results in a recognized loss of coverage in a health or FSA plan.

In PeopleSoft Human Resources Base Benefits, qualifying events are triggered through PeopleCode. In PeopleSoft Benefits Administration, qualifying events are triggered after Event Maintenance has been finalized. The exception (for both PeopleSoft Human Resources Base Benefits and PeopleSoft Benefits Administration) is overage dependent processing. Overage dependent events are identified during the COBRA batch process and are automatically adjusted.

Information about triggered events is transferred to the COBRA Activity Table for further analysis during the COBRA process.

There are two types of COBRA events: initial and secondary. An initial event is the first qualifying event for an employee.

Initial COBRA Events

The following table shows the initial qualifying COBRA events that PeopleSoft delivers, the user actions that trigger them, and the potential COBRA beneficiaries of each event.

Qualifying COBRA Event	User Action Trigger	Potential COBRA Beneficiaries
Loss of eligibility due to termination	Employee status changes to <i>Terminated</i> or <i>Suspended</i> .	Employee and dependents
Loss of eligibility due to reduction in hours	Employee status remains Active; Standard hours decrease.	Employee and dependents
Loss of eligibility due to retirement	Employee status changes to Retired.	Employee and dependents
Loss of eligibility due to military leave	Leave of Absence/Military Leave action/action reason combination is entered for the employee.	Employee and dependents

Qualifying COBRA Event	User Action Trigger	Potential COBRA Beneficiaries
Death of employee	Employee status changes to <i>Deceased</i> or a Family Status Change/Death action/action reason combination is entered for an employee.	All dependents
Divorce	Marital status changes to <i>Divorced</i> ; spouse becomes ex-spouse.	Spouse
Marriage of dependent	Dependent marital status changes to <i>Married</i> .	Individual dependent
Dependent reaches coverage age limit (overage dependent)	No user action; current age of dependent exceeds maximum dependent age or maximum student dependent age. (The system checks whether or not the dependent is a student.)	Individual dependent
Employee becomes entitled to Medicare	Medicare entitlement date is entered.	All dependents

Note. According to federal government guidelines, employees and spouses of employees who undergo voluntary or involuntary termination for “gross misconduct” are *not* eligible for COBRA coverage. COBRA Administration does not differentiate between terminations for gross misconduct and other termination types, but you can set up action reason codes and add PeopleCode to perform this function.

Secondary COBRA Events

Secondary events extend coverage eligibility and are limited to dependents who are currently enrolled in COBRA coverage. A secondary event must meet the following requirements:

- The dependent must currently be enrolled in COBRA coverage as a result of an initial COBRA event.
- The initial COBRA event must be associated with a change to an employee’s job status (such as a reduction in hours, termination, or retirement), and the secondary event must involve loss of coverage for the employee’s dependent (such as divorce, marriage of dependent, overage dependent, death of employee, or a Medicare entitlement).

The triggers for secondary events are identical to the triggers for initial events, with one exception. If the initial event is a termination and the secondary event is a death, you must use the delivered action/action reason combination of FSC/DEA to successfully process the event.

See Also

Chapter 16, “Managing COBRA,” Processing Enrollments for Secondary Events, page 233

Page Used to Determine Qualified COBRA Events

Page Name	Object Name	Navigation	Usage
COBRA Activity	COBRA_ACTIVITY	Benefits, Administer COBRA Benefits, Manage Automated Participation, Review COBRA Triggers	Add, delete, and review COBRA events.

Adding, Deleting, and Reviewing COBRA Events

Access the COBRA Activity page.

COBRA Activity									
COBRA Activity									
Activity Coverage Override									
*EmpID	Empl Rcd#	Name	*Event Date	*CBR Action	*Activity Source	Ben Rcd#	BAS Sched ID	BAS Event ID	
FDG966	0	Shannon,Dalal	02/01/1997	TER	Job Data	0			-
FDG969	0	Shockley,Dennis	02/01/1997	TER	Job Data	0			-
FRG705	0	Abel,Sebastian	11/10/1996	TER	Job Data	0			-
FRG723	0	Zigler,Andy	11/10/1996	TER	Job Data	0			-
FRG725	0	Talevares,Jorge	01/18/1997	TER	Job Data	0			-
FRG726	0	Grieves,Penny	01/18/1997	TER	Job Data	0			-
FRG8100	0	Smith,Mark	12/01/1996	TER	Job Data	0			-
FRG8101	0	Kanning,Shirley	12/01/1996	TER	Job Data	0			-
FRG8102	0	Peters,Sharon	12/01/1996	TER	Job Data	0			-
+									

COBRA Activity page: Activity tab

COBRA Activity									
COBRA Activity									
Activity Coverage Override									
*EmpID	Empl Rcd#	Name	*Event Date	*CBR Action	Coverage Override	Alt Covrg Term Date	Coverage As-Of Date		
FDG966	0	Shannon,Dalal	02/01/1997	TER	☐				-
FDG969	0	Shockley,Dennis	02/01/1997	TER	☐				-
FRG705	0	Abel,Sebastian	11/10/1996	TER	☐				-
FRG723	0	Zigler,Andy	11/10/1996	TER	☐				-
FRG725	0	Talevares,Jorge	01/18/1997	TER	☐				-
FRG726	0	Grieves,Penny	01/18/1997	TER	☐				-
FRG8100	0	Smith,Mark	12/01/1996	TER	☐				-
FRG8101	0	Kanning,Shirley	12/01/1996	TER	☐				-
FRG8102	0	Peters,Sharon	12/01/1996	TER	☐				-
+									

COBRA Activity page: Coverage Override tab

Activity Tab

CBR Action (COBRA action) Describes the type of event that took place.

Activity Source Indicates who or what initiated the event.

Ben Rcd# (benefit record number)	Indicates the benefit record affected by the event.

Coverage Override Tab

CBR Act Src (COBRA action source)	This identifies the source of the activity record.

Coverage Override	Select when an alternate coverage termination date should be used to determine qualified COBRA coverage.

Alt Covrg Term Date (alternate coverage termination date)	The date when coverage was previously terminated. Required when the coverage override flag is selected.

Covrg As-Of Date (coverage as of date)	The date that coverage should begin if the event is fully qualified. The system sets the COBRA event date if this field is left blank.

See Also

PeopleSoft 8.8 Benefits Administration PeopleBook, “Defining Eligibility Rules”

PeopleSoft 8.8 Benefits Administration PeopleBook, “Creating Event Rules”

PeopleSoft 8.8 Benefits Administration PeopleBook, “Running the PeopleSoft Benefits Administration Process,” Understanding Event Maintenance and COBRA Administration

Overriding Initial and Secondary COBRA Events

The system assumes that the date of the event and the date that an employee’s benefits terminate are the same, which is not always true.

For example, suppose that an employee drops spousal coverage during Open Enrollment and then later gets divorced. The benefit plan must make COBRA coverage available upon receiving notice of the divorce.

Another example is when an employee decides not to return to work from FMLA. COBRA coverage becomes available on the day human resources is notified the employee is not returning, not on the last day of the FMLA, unless notification is made on the last day of FMLA. The maximum coverage period usually begins on that day also.

In order for the COBRA process to recognize these events as enabling dependents to become eligible for COBRA benefits, you must enter the event directly into the COBRA Activity Table.

You cannot enter an event unless you have selected Manual Events Allowed in the COBRA Event Rules Table for the COBRA event classification. You may want to add a new COBRA event classification to identify these specific situations. COBRA events triggered through the Base Benefits business process or Benefits Administration can be deleted on the COBRA Activity Table, but not modified. COBRA events that you enter through the COBRA Activity page can be changed.

Running the COBRA Process

This section provides an overview of the COBRA process and describes how to:

- Run the COBRA process.
- Understand COBRA event status.
- Assign qualified COBRA beneficiaries to benefit programs.
- Determine eligible plan types.
- Determine eligible options.
- Calculate COBRA cost for eligible options.
- Process secondary qualified COBRA events.
- View error messages.

Understanding the COBRA Process

The COBRA process determines employee and dependent eligibility for COBRA benefit coverage.

For an employee or dependent to become a qualified COBRA beneficiary, the following two requirements must be met:

- The person must have experienced a qualifying event.
- The person must have had health coverage on the day of the qualifying event and have lost coverage.

If these requirements are met, COBRA process assigns the beneficiary a benefit program and allows that person to elect COBRA health coverage.

Pages Used to Run the COBRA Process

Page Name	Object Name	Navigation	Usage
Run Control	COBRA_RUNCTL	Benefits, Administer COBRA Benefits, Manage Automated Participation, Qualify Event/Proc Enrollment	Determine COBRA eligibility.
Process Messages	COBRA_MESSAGES	Benefits, Administer COBRA Benefits, Review Processing Results, Review Processing Message	View error messages for the COBRA process.

Running the COBRA Process

Access the Run Control page.

COBRA Processing Phase Displays the phase where processing begins. Possible phases are:

Ready: Ready for processing.

Overage: Processing overage dependents.

Activity: Processing COBRA activity.

Qualify: Processing qualifying events.

Participant: Processing COBRA participants.

Complete: Processing completed.

Process Overage Dependents

Clear this check box to skip overage dependent processing during the batch run.

Chk Point Interval in Minutes (check point interval in minutes)

Enter the number of minutes before the process commits information that's been processed so far and updates the information displayed in the Restart Position group box.

If an error occurs, the system restarts the process from the last checkpoint.

Restart Position

Displays the position from which to restart the COBRA process from if a system failure occurs.

Understanding COBRA Event Status

Once a COBRA event has been triggered (online or through Benefits Administration), the COBRA process determines whether any employees or dependents have lost health coverage due to the event. The system considers these people to be qualified COBRA beneficiaries.

Each person analyzed by the COBRA process receives three status values:

- Event qualification status
- Initial event status
- Secondary event status

The event qualification status identifies participants who qualify for COBRA. Values are:

- Not COBRA Qualified
- COBRA Qualify Error
- COBRA Qualified
- Qualify Pending
- Unprocessed

The initial event status tracks the process of the event in the COBRA cycle; it also marks whether participants have their options prepared and are notified of coverage. Values include:

- Qualify Pending
- Qualified
- Not Qualified
- Options Prepared
- Notified

- Election Entered
- Election Error
- Election Enrolled
- Enrollment Complete

The secondary event status is always Not Qualified unless the COBRA participant has been affected by a secondary event, such as divorce or Medicare entitlement. Other values include:

- Qualify Pending
- Qualified
- Notified
- Coverage Extended

When a participant is enrolled in COBRA coverage through an initial event and a qualified secondary event occurs for all of that participant's plans, the system sets the participant's initial event status to Not Qualified.

In the case of a combination event, which acts as an initial event for certain plans and as a secondary event for other plans, plans for which the combination event acts as a secondary event are set to Not Qualified. Initial event status values for plans where the combination event acts as an initial event are set to appropriate levels for the current stage of processing.

Status values for initial and secondary events are updated as participants move through the COBRA process.

See Also

Chapter 16, "Managing COBRA," Processing Enrollments for Secondary Events, page 233

Assigning Qualified COBRA Beneficiaries to Benefit Programs

Benefit program assignment differs for COBRA events initiated by the Base Benefits business process and PeopleSoft Benefits Administration.

If a COBRA event is initiated by Base Benefits, the system assigns each qualified beneficiary to the benefit program that the employee was enrolled in on the day prior to the COBRA event date.

If the event is processed through PeopleSoft Benefits Administration, then the system determines benefit program eligibility for each qualified COBRA beneficiary, using the eligibility parameters from the latest run of PeopleSoft Benefits Administration and the qualified beneficiary's zip code. If no benefit programs satisfy this eligibility criteria, then the participant is assigned to the benefit program enrolled in on the day prior to the COBRA event date.

Note. This process only occurs for qualified participants who have a COBRA process status of *Open For Processing* (as opposed to *Closed* or *Void*).

See Also

Chapter 16, "Managing COBRA," Adjusting and Reprocessing COBRA Events, page 236

PeopleSoft 8.8 Benefits Administration PeopleBook, "Running the PeopleSoft Benefits Administration Process," Understanding Event Maintenance and COBRA Administration

Determining Eligible Plan Types

Beneficiaries are eligible for all COBRA-qualified group health plan types they were enrolled in prior to the COBRA event. This includes all Health (1x) plan types and the Health FSA (60) plan type.

In order for a plan type within a specific benefit program to be designated as COBRA-qualified, you must select the COBRA Plan check box in the Plan Type and Option page of the Benefit/Deduction Program component.

Determining Eligible Options

Eligible options are determined for each qualified plan type.

For employees, spouses, and ex-spouses, eligible options must satisfy the following criteria:

- The benefit plan associated with the options matches the benefit plan of the lost coverage of the employee, spouse, or ex-spouse.
- The coverage code has the COBRA Coverage Set field selected and is less than or equal to the coverage code of the lost coverage of the employee, spouse, or ex-spouse.
- For spouses and ex-spouses, the coverage code selected cannot *require* a spouse or ex-spouse (Spouse Only Coverage Codes).

For all dependents besides spouses and ex-spouses, eligible options must satisfy the following criteria:

- The benefit plan associated with the options matches the benefit plan of the dependent's lost coverage.
- The dependent's coverage code is Employee Only (Dependent Only Coverage).

Benefits Administration uses a different method to determine option eligibility.

See Also

PeopleSoft 8.8 Benefits Administration PeopleBook, “Running the PeopleSoft Benefits Administration Process,” Understanding Event Maintenance and COBRA Administration

Calculating COBRA Costs for Eligible Options

This section describes how to calculate COBRA costs.

To calculate COBRA cost:

1. Access the Benefit Program page.
2. Enter the COBRA percentage amount.

The COBRA process calculates a charge for each option using the sum of the total coverage costs (employee plus employer) multiplied by the surcharge defined here.

3. Enter the COBRA disabled surcharge percentage.

If the COBRA participant is *disabled*, the COBRA cost for months 19-29 is multiplied by this surcharge.

When you select Waive COBRA Surcharge on the COBRA Event Rules Table page for a specific COBRA event classification, the system does not add the COBRA surcharge or disabled surcharge.

COBRA charges are sent to the COBRA beneficiary through Benefits Billing processes, as long as Benefits Billing is selected in the Products page of the Installation component.

See Also

Chapter 15, “Managing Benefits Billing,” page 199

Processing Secondary COBRA Qualifying Events

Although COBRA governmental regulations describe how secondary COBRA qualifying events should be processed, PeopleSoft event rules allow for a different implementation of secondary event processing.

Three fields defined on the Event Rules page are used to process secondary events.

Secondary Event Role	Identifies whether the event can be considered a secondary event.
Second Event Additional Months	Defines by how many months the secondary event extends a COBRA participant’s coverage.
Secondary Event Add Mode	Defines whether the additional months extend the coverage 36 months from the coverage begin date of the initial event or add 36 months to the COBRA event date of the secondary event.

See Also

Chapter 6, “Setting Up Additional Human Resources Base Benefits Features,” Setting Up COBRA Administration, page 95

Chapter 16, “Managing COBRA,” Processing Enrollments for Secondary Events, page 233

Viewing Error Messages

Access the Process Messages page.

Benefit Rcd# (benefit record number)	The employee benefit record number that was affected by the COBRA event.
CBR Evt ID (COBRA event identification)	The identification number assigned to the event by the COBRA process.
Dep/Benef (dependents/beneficiaries)	Any relevant dependents or beneficiaries.

Creating Notification Letters

This section describes how to:

- Determine notification recipients.
- Print notification letters for initial events.
- Print notification letters for secondary events.
- Reprint notification letters.

See Also

Chapter 16, “Managing COBRA,” Processing Enrollments for Secondary Events, page 233

PeopleSoft 8.8 Application Fundamentals for HRMS PeopleBook, “PeopleSoft Application Fundamentals for HRMS Reports,” Manage Base Benefits Reports

Pages Used to Print Notification Letters

Page Name	Object Name	Navigation	Usage
COBRA Qualify Ltr (COBRA qualify letter)	RUNCTL_CBR001	Benefits, Administer COBRA Benefits, Manage Automated Participation, Create Initial Letter	Print notification letters for initial COBRA events.
Secondary Evt Ltr (secondary event letter)	RUNCTL_CBR002	Benefits, Administer COBRA Benefits, Manage Automated Participation, Create Secondary Letter	Print notification letters for secondary COBRA events.
Letter Reprinting	CBR_PRT	Benefits, Administer COBRA Benefits, Manage Automated Participation, Reprint Selected Letters	Select parameters for reprinting notification letters.

Determining Notification Recipients

The qualifying event determines recipients.

- For termination, reduction in hours, and retirement events, the employee and each covered dependent are notified.
- When Medicare entitlement or death of employee events occur, each dependent is notified.
- When divorce or loss of dependent status events occur, the spouse or dependent is notified.

Printing Notification Letters for Initial Events

Access the COBRA Qualify Ltr page.

The Initial Notification Letter process generates letters for COBRA participants with an initial event status of *Options Prepared* and an event status of *Open For Processing*. Letters include:

- The nature of the qualifying event and the date it occurred.
- The last day of active coverage of the qualified participant’s original benefit plans.
- The plan types for which the qualified participant is eligible to receive COBRA coverage.
- The COBRA coverage start and end dates for each plan, and the response date by which the qualified participant must notify you of their elections.

Along with each initial notification letter, the system prints a COBRA continuation coverage election form for employees to record their elections.

Once an initial notification letter is generated for a qualified COBRA participant, the initial event status is changed to *Notified*. The election end date is calculated for each plan type as 60 days past the latter of the notification date (on the notification letter) or the loss of coverage.

- As of Date** Enter the date for the time period that you want the letters.
- ‘Reprint’ Appears on Letters** Select this check box if you want the word *Reprint* to appear on the letter.
- Reprint ID** Select the ID number associated with the letters that you want reprinted.

Printing Notification Letters for Secondary Events

Access the Secondary Evt Ltr page.

The process for printing notification letters for secondary events is identical to that for initial events.

The secondary notification letter includes information on how long COBRA coverage is to be extended.

Recipients have their secondary event status changed to *Notified* and their process status changed to *Closed for Processing*.

Reprinting Notification Letters

Access the Letter Reprinting page.

Letter Reprinting

Print ID:

☐ Reprint All Participants

Notification Date

From Date: End Date:

EmpID	Name	Ben Rcd#	COBRA Event ID	Dep/Benef	Dependent Name	Reprint all Dependents	
KU0116	Stankowski, Martha	0	0	00		☒	

Customize Find View All First 1 of 1 Last

Letter Reprinting page

This page enables you to reprint all letters, or to select specific employees for whom letters are to be reprinted. You can specify a notification date range for which the reprint is to occur.

Entering COBRA Elections and Waivers

This section provides an overview of COBRA elections and describes how to:

- Record COBRA elections and waivers.

- Validate and enroll elections.

Understanding COBRA Elections

Qualified COBRA beneficiaries can:

- Select COBRA for one or more plan types.
- Waive COBRA for all plan types.
- Revoke a waiver for one or more plan types.

Unlike Benefits Administration, COBRA participants can make enrollment decisions at the plan type level.

Employees and dependents are individually qualified for COBRA coverage, and they can choose to be covered as individuals.

For example, suppose that an employee with Employee plus Spouse coverage terminates employment and loses all regular health coverage. The employee and the spouse both qualify for COBRA coverage. The spouse can select either to be covered individually as a non-employee (even if the employee doesn't elect coverage), they can continue to be covered under the employee as a dependent, or the spouse may elect "Spouse Only" coverage (if the terminated employee coverage code is set to "Spouse Allowed").

When you enter elections for qualified COBRA participants, the system sets their Initial Event Status to *Election Entered*.

See Also

Chapter 16, "Managing COBRA," Managing Non-Employee COBRA Participants, page 243

Page Used to Enter COBRA Elections and Waivers

Page Name	Object Name	Navigation	Usage
Participant Data	COBRA_PARTIC_ENT1	Benefits, Administer COBRA Benefits, Manage Automated Participation, Participant Elections	Record elections or waivers for COBRA coverage.

Recording COBRA Elections and Waivers

Access the Participant Data page.

COBRA Election

Indicate whether to elect or waive COBRA coverage.

To revoke a waiver of coverage, change the selection from *Waive* to *Elect*.
Waivers cannot be revoked after the election end date.

The current date is automatically set as the election, waive, or revoke date, although you can override that value for elections.

Participant Enrollment

Plan Type

Enter the elected option choices.

Covrg Begin (coverage begin), Covrg End (coverage end) and, Election End	Predetermined by the COBRA process.
COBRA Election	Elect or waive each plan type. The election or waive date is automatically set, although you can override the election date.
Provider ID	For health plan types. Enter the name of the employee's doctor, an ID number, or any other format that the health provider requires.
Previously Seen	Select to indicate that the employee is a current patient of the indicated physician.

Once an election has been entered, validated and enrolled, the election cannot be changed without COBRA reprocessing. After reprocessing, you can add new elections or make election changes if the coverage election date is on or before the coverage election end date and if the elections have not been entered.

Validating and Enrolling Elections

The system reviews plan type, option code, and dependent/beneficiary elections made for qualified COBRA participants as their elections are saved. If all of the plan types for which the participant is eligible reflect either an enrollment election or waiver, the system changes the participant's initial event status to *Enrollment Completed* and the process status to *Closed for Processing*. If some of the plans have not had an entry made, the participant's initial event status changes to *Enrolled* (for the specific plan), and the process status remains *Open for Processing*. In either case, if errors are discovered, the initial event status becomes *Election Error*.

Enrollment in Health or FSA Plans

If the initial election status is *Enrollment Completed* or *Enrolled*, you can access health and/or FSA plan information in the Health Benefits and FSA Benefits pages.

Creation of Non-Employee Status

If a dependent elects individual COBRA coverage or has a qualifying second event, then that non-employee participant receives a system-generated employee ID.

Notification to Billing System

If Benefits Billing is selected in the Installation Table, validated and enrolled COBRA participants are enrolled in the Benefits Billing system for elected plan types. COBRA surcharges and coverage start and end dates are also sent to Benefits Billing.

Validation and Enrollment Error Messages

Error messages generated during validation and enrollment can be viewed either by using the Process Messages page or by running the COBRA Error report. Each time the COBRA validation and enrollment process is run, error messages from the previous run are deleted.

See Also

[Chapter 16, “Managing COBRA,” Managing Non-Employee COBRA Participants, page 243](#)

[Chapter 16, “Managing COBRA,” Viewing Error Messages, page 228](#)

[Chapter 15, “Managing Benefits Billing,” page 199](#)

Processing Enrollments for Secondary Events

This section describes issues regarding:

- Initial event status and secondary events.
- Differences in individual and dependent coverage processing.
- Combination events.

Initial Event Status and Secondary Events

When a secondary event is processed, the system reviews the initial event to determine if its event status is *Closed to Processing* (indicating that the participant has made an election or waived COBRA coverage). If the initial event is not closed, the secondary event’s status becomes *Qualified Pending*; the secondary event needs to be reprocessed after the initial event is closed.

This can happen if dependents are covered under an employee’s coverage instead of electing independent coverage.

For example, suppose that an employee and her dependents become qualified beneficiaries after she terminates her employment. She enrolls in family coverage for plan types 10 and 11—covering herself, her spouse and her daughter—and waives plan type 14. As a result, the terminated employee’s record is *Closed to Processing*. But the dependents’ records remain *Open for Processing*, because they have not independently elected or waived coverage.

To close an initial event and reprocess a secondary event:

1. A secondary event, such as a divorce or dependent marriage, occurs.
The Human Resources system processes the personnel action.
The COBRA process evaluates the secondary event and returns a status of *Qualified Pending*.
2. Determine that the initial event is still *Open for Processing* because the dependent records were not waived or enrolled.
3. Waive or elect options for the dependents and run the COBRA process to close the initial event.
4. Use the Event Status Update page to reprocess the secondary event by changing the reprocess status for the secondary event to *Qualify Event*.

After you run the COBRA process again, the secondary event should be set to *Qualified*.

See Also

[Chapter 16, “Managing COBRA,” Adjusting and Reprocessing COBRA Events, page 236](#)

Differences in Individual and Dependent Coverage Processing

When secondary events occur, COBRA participants with individual coverage are processed differently than those with dependent coverage.

For participants with individual coverage, a secondary event extends coverage according to the defined secondary event rules. The system deletes the existing termination record, reinserts it into the coverage begin date, and sets an effective date equal to the extended COBRA coverage end date + 1. The COBRA enrollment status is set to *Coverage Extended*.

Participants with dependent coverage are switched to individual COBRA participants, with individual COBRA coverage as of the COBRA event date of the secondary event. The system automatically establishes the participant as a non-employee in the system and enrolls the participant in employee-only coverage for all plan types that meet this condition. The employee-only coverage is within the same benefit plan that the participant was covered in as a dependent under COBRA. The coverage end date is calculated based on the predefined secondary event rules, and the COBRA enrollment status is set to *Coverage Inserted*.

Combination Events

A COBRA event can be an initial event for one plan type and a secondary event for another type. For example, suppose that an employee has Employee Plus Spouse coverage for plan types 10, 11, and 14. Then the employee transfers and both the employee and the spouse lose coverage under plan types 11 and 14; they are eligible for 18 months of COBRA coverage for these types, and they elect this coverage.

The employee divorces while the COBRA coverage is still active. The divorce event causes the employee's ex-spouse to lose coverage for plan type 10 (an initial event); the ex-spouse is qualified for 36 months of COBRA coverage under that plan. The divorce is also a secondary event for plan types 11 and 14; the ex-spouse is qualified to have coverage extended for those plans for up to 36 months from the original coverage begin date.

The two events—the initial event for plan type 10 and the secondary event for plan types 11 and 14—progress through the COBRA system independently in terms of notification letters and ongoing status indicators.

Managing COBRA Events

This section describes how to:

- Review COBRA event summaries.
- Adjust and reprocess COBRA events.

Pages Used to Manage COBRA Events

Page Name	Object Name	Navigation	Usage
Event Summary	COBRA_EVENT_INQ1	Benefits, Administer COBRA Benefits, Review Processing Results, Review Event Summary	Review information about COBRA events and associated beneficiaries.
Event Status	COBRA_STATUS1	Benefits, Administer COBRA Benefits, Manage Automated Participation, Update Event Status	Adjust, reprocess, and void COBRA events.

Reviewing COBRA Event Summaries

Access the Event Summary page.

Event Summary

Mapin, George N
EmplID: KU0115
Ben Rcd#: 0

Event Status

Find | View All First 1 of 1 Last

CBR Evt ID: 1

Empl Rcd#: 0

Event Process Status: Closed for Processing

Event Date: 03/01/2000

BAS Evt ID: 1

Event Qualification Status: COBRA Qualified

Event Class: Termination

BAS Sched ID: KUEM

Event Reprocess Indicator: Normal Processing

Employee/Dependent Status

Find | View All First 1 of 4 Last

Dep/Benef: 00 Mapin, George N

Relationship: Employee

COBRA Election: Elect

COBRA Emplid: KU0115

Processing Information

Qualification Status: COBRA Qualified

Initial Event Status: Enrollment Complete

Process Status: Closed

Secondary Event Status: Not Qualified

Reproc Indicator: Normal Processing

BAS Assign Status: Program Elig Assign None

Benefit Program: GBI US Fulltime Benefit Pgm

Date Information

Election: 03/15/2000

Notifications Dates

Initial:
Second:
Term Notification:

Event Summary page (1 of 2)

Plan Status			
Plan Type: 10	Covrg Election: Elect	Option Code: 34	Benefit Plan: KUMED
Covrg Cdt: 4	Family	Covrg Begin: 03/01/2000	End: 08/31/2001
Event/Status Information			
Process Status: Closed for Processing	Event Type: Initial COBRA Event		
Reprocess Indicator: Normal Processing	Initial Event ID:		
Enrollment Status: Enrolled	Second Event ID:		
Date Information			
Elect: 03/15/2000	Waive:	Term Date:	
Elect End: 04/30/2000	Revoke:	Termination Reason: Not Terminated	

Event Summary page (2 of 2)

Adjusting and Reprocessing COBRA Events

Access the Event Status page.

Event Status						
Stankowski,Martha		EmplID: KU0116				
Event Status						
Event ID: 1	Event Date: 07/15/2000	Empl Rcd#: 0	Event Class: Overage			
Qualification Status: COBRA Qualified	Ben Rcd#: 0	*Process Status: Closed				
*Reprocess Indicator: Normal Processing	☐ COBRA Event Conflict ☐ BAS Data Change					
Employee/Dependent Status						
Dep/Benef: 02	Stankowski,Richard	*Process Status: Closed for Processing				
Qualification Status: COBRA Qualified	*Reprocess Indicator: Normal Processing					
Init Event Status: Enrollment Complete	Second Event Status: Not Qualified					
Plan Status						
Plan Type	Event Type	COBRA Election	Event ID	*Process Status	Enrollment Status	*Reprocess Indicator
10	Initial	Elect		Closed	Enrolled	Normal Processing
11	Initial	Elect		Closed	Enrolled	Normal Processing

Event Status page

Reprocess Indicator

Set to reprocess a COBRA phase for events, participants, or plan types.

To reprocess any level, the process status for that level and any above it must be *Open for Processing*.

You cannot reprocess initial events that have secondary events dependent on them.

At the event level, you can only reprocess to *Prepare Options* if the *Option Prepare* phase has already been completed.

At the participant plan type level, you can only select *Elect Options* when the plan type is Enrolled and the associated event is an initial event.

After choosing a value, run the COBRA process again to reprocess to the selected status.

COBRA Event Conflict

Selected if the system determines that two or more events are in conflict with each other. An example is when an event is entered and processed, and another event is entered with an earlier date than the first event.

The system sends a message to the COBRA administrator to analyze the conflicting events and take any appropriate actions.

Voiding Events, Participants, or Benefit Plans

When you enter *Void Event* in the Reprocess Indicator at the COBRA event level, the system ignores all reprocessing indicators at the lower levels. All COBRA participants and participant plans are voided, and all enrolled COBRA benefits are deleted. Notification is sent to the Benefits Billing system to terminate billing for voided participants.

When you enter *Void Event* in the Reprocess Indicator at the COBRA participant level, the result is similar to voiding a COBRA event. The COBRA participant record and all COBRA benefit plan records associated with that participant are deleted. Benefits Billing is notified to terminate billing.

Voiding a COBRA benefit plan associated with an initial event deletes all enrolled COBRA benefit records associated with that plan; Benefits Billing is notified to terminate billing. Voiding a COBRA benefit plan associated with a secondary event readjusts termination dates back to those associated with the initial plan; Benefits Billing is notified to adjust billing.

Qualifying Events

When you enter *Qualify Event* in the Reprocess Indicator at the COBRA event level, all reprocessing indicators at the lower levels are ignored. All enrolled COBRA benefits are deleted.

Preparing and Electing Options

When you set Prepare Options at the event level, if a participant or plan has a Reprocess Indicator setting of *Void Event*, that reprocessing command takes precedence over Prepare Options. For example, if you want to void the COBRA election plan type 10 and prepare options for plan type 11, the system first voids plan type 10 and then prepares options for plan type 11.

Prepare Options reprocessing deletes all of the plan, option, and dependent records associated with that event. Benefits Billing is notified to terminate billing.

See Also

Chapter 16, “Managing COBRA,” Running the COBRA Process, page 224

Managing COBRA Benefit Plan and Dependent Information

This section describes how to:

- Change benefit programs.
- View and update health plan elections.
- Enroll dependents in health plans.
- View and update FSA enrollments.
- Add new dependents.

Pages Used to Manage COBRA Benefit Plan and Dependent Information

Page Name	Object Name	Navigation	Usage
Prog Participatn (program participation)	COBRA_PROG_PARTIC1	Benefits, Administer COBRA Benefits, Enroll in Benefits, Assign to Benefit Program	Change benefit program participation for Open Enrollment and Family Status Change events.
Election	COBRA_HEALTH1	Benefits, Administer COBRA Benefits, Enroll in Benefits, Health Benefits	View or update health plan elections.
Dependents	COBRA_HEALTH2	- Benefits, Administer COBRA Benefits, Enroll in Benefits, Health Benefits - Click the Dependents tab.	Enroll dependents in health plans.
FSA Benefit Enrol (FSA benefit enroll)	COBRA_FSA	Benefits, Administer COBRA Benefits, Enroll in Benefits, FSA Benefits	View or update FSA enrollments.
Name	COBRA_DEP_BENEF1	Benefits, Administer COBRA Benefits, Maintain COBRA Non-Employees, Modify Dependent/Beneficiaries	Add new dependents for COBRA participants (including non-employee participants).
Address	COBRA_DEP_ADDR	- Benefits, Administer COBRA Benefits, Maintain COBRA Non-Employees, Modify Dependent/Beneficiaries - Click the Address tab.	Enter dependent address information.
Personal Profile	COBRA_DEP_BENEF2	- Benefits, Administer COBRA Benefits, Maintain COBRA Non-Employees, Modify Dependent/Beneficiaries - Click the Personal Profile tab.	Enter dependent details.

Changing Benefit Programs

Access the Prog Participatn page.

Prog Participatn	
Mapin,George N	ID: KU0115 Empl Rcd#: 0
Benefit Program Enrollment Find View All First 1 of 1 Last	
*Effective Date: 03/01/2000	COBRA Event ID: 1
*Benefit Program: KU1 GBI US Fulltime Benefit Pgm	Currency Code: USD

Prog Participatn page

To change the benefit program, use the search function to select a new one.

Viewing and Updating Health Plan Elections

Access the Election page.

Election Dependents	
Mapin,George N	ID: KU0115 Empl Rcd#: 0
Plan Type Find View All First 1 of 2 Last	
Plan Type: 10 Medical	COBRA Event ID: 1
Coverage Find View All First 1 of 1 Last	
*Coverage Begin Date: 09/01/2001	*Election Date: 03/15/2000
*Coverage Election: Term	Option:
Benefit Plan:	☐ Previously Seen
Coverage Code:	
Health Provider:	
HIPAA Report Date (Emp):	
Description: KU1 GBI US Fulltime Benefit Pgm	Currency: USD

Election page

Coverage Begin Date	Automatically set to the date in the Event Summary 2 page.
Coverage Election	Displays whether the COBRA health benefit record in view is currently elected or terminated.
Coverage Code	When you exit this field, the system calculates the monthly cost of the benefit.
Health Provider	Enter the name of the employee's doctor, an ID number, or any other format that the health provider may require.
Previously Seen	Indicate that the employee is a current patient of the indicated physician. Becomes available when a health provider ID is entered.

HIPAA Report Date (Emp) (HIPAA report date [employee])

Displays the date that the employee's certificate of creditable health coverage was printed, if health coverage was terminated. These certificates are guaranteed to employees by the Health Insurance and Accountability Act (HIPAA) of 1996; you can print them by running HIPAA reports.

Note. The certificate of creditable coverage lists all group health coverage that an employee had for the 12 month period prior to the date coverage ended.

Enrolling Dependents in Health Plans

Access the Dependents page.

The screenshot shows the 'Dependents' page for employee Mapin, George N (ID: KU0115, Empl Rcd#: 0). The page has tabs for 'Election' and 'Dependents'. Under the 'Dependents' tab, there's a section for 'Plan Type' (Medical) with 'COBRA Event ID: 1'. Below this is a 'Coverage' section showing 'Coverage Begin Date: 09/01/2001'. The main part of the page is a table titled 'Dependent/Beneficiaries' with columns: *ID, Name, Relationship, Health Provider ID, and Previously Seen. The table is currently empty, and there are navigation controls like 'Find', 'View All', 'First', 'Last', and '1 of 1'.

Dependents page

ID Select a dependent ID to add available beneficiaries to the selected COBRA plan.

Health Provider ID Enter the name of the dependent's doctor, an ID number, or any other format that the health provider may require.

Previously Seen Select to indicate that the dependent is a current patient of the indicated physician. Becomes available when a health provider ID is entered.

Viewing and Updating FSA Enrollments

Access the FSA Benefit Enrol page.

FSA Benefit Enrol

Mapin, George N ID: KU0115 Empl Rcd#: 0

Plan Type: 60 Flex Spending Health - U.S. **COBRA Event ID:** 1

Coverage Find | View All First 1 of 1 Last

***Coverage Election:** Term **Election Date:** 03/15/2000

Coverage Begin Date: 09/01/2001

Benefit Plan: **OptionCd:**

Contribution Level	Account Information
Annual Pledge:	FSA Account Status: Terminated
Empl Contribution:	Contributions YTD:

Description: KU1 GBI US Fulltime Benefit Pgm

FSA Benefit Enrol page

Use the Coverage Election field to view and change whether the displayed COBRA FSA plan is elected or terminated.

Adding Dependents

Access the Name page.

Name Address Personal Profile

Stankowski, Richard ID: C10001

Dependent/Beneficiaries Find | View All First 1 of 1 Last

***Dependent/Beneficiary ID:** 01 + -

***Relationship to Employee:** Son **DepBenef Type:** COBRA Only

Format Using: USA United States Refresh the Name Field

Person Name

Prefix: **First:** Thomas **Middle:** Edward

Last: Stankowski **Suffix:** 🔍

Name: Stankowski, Thomas Edward

Name page

DepBenef Type

(dependent/beneficiary type)

Displays *COBRA Only*, because this component is for COBRA dependents.

Managing Non-Employee COBRA Participants

When a COBRA-qualified dependent selects individual coverage after an initial event or undergoes an event that involves a loss of dependent status, that dependent becomes a non-employee COBRA participant. Non-employee COBRA participants can declare their own dependents and change benefit programs and plans.

This section describes how to:

- Maintain non-employee identity and department security information.
- Convert non-employee individual coverage to dependent coverage.

Note. When you add a non-employee through COBRA, the non-employee record may not show in other PeopleSoft Human Resources processes until the Refresh Personal Data process is run.

See Also

PeopleSoft 8.8 Human Resources PeopleBook: Administer Workforce, “Hiring Your Workforce”

PeopleSoft 8.8 Human Resources PeopleBook: Administer Workforce, “Updating Workforce Information”

Pages Used to Manage Non-Employee COBRA Participants

Page Name	Object Name	Navigation	Usage
Name History	PERSONAL_DATA1	Benefits, Administer COBRA Benefits, Maintain COBRA Non-Employees, Modify Personal Information	Update COBRA-qualified dependent name information.
Address History	PERSONAL_DATA1B	• Benefits, Administer COBRA Benefits, Maintain COBRA Non-Employees, Modify Personal Information • Click the Address History tab.	Update COBRA-qualified dependent address information.
Personal History	CBR_PERSONAL_DATA2	• Benefits, Administer COBRA Benefits, Maintain COBRA Non-Employees, Modify Personal Information • Click the Personal History tab.	Update COBRA-qualified dependent personal information.
Identity/Dept Security	CBR_PERSONAL_DATA3	• Benefits, Administer COBRA Benefits, Maintain COBRA Non-Employees, Modify Personal Information • Click the Identity/Dept Security tab.	Maintain department security information for non-employee COBRA participants.

Maintaining Non-Employee Identity and Department Security Information

Access the Identity/Dept Security page.

Name: Stankowski, Richard **Non-Employee** **EmplID:** C10001

National ID

Country	*National ID Type	Description	National ID	Primary ID		
USA	PR	Social Security Number	545-77-8854	☒	+	-

Employment Information Find | View All First 1 of 1 Last

Empl Rcd#: 0 **Ben Rcd#:** 0 **Service Date:** 07/01/1999

Job Information

*Effective Date	*Business Unit	*Department		
07/15/2000	GBIBU	13000	+	-

Identity/Dept Security page

Country	Enter the country that issued the worker's national ID. Values are stored in the Country Table.
National ID Type	Populated automatically from the National ID Type Table. You can select another type.
National ID	Enter the worker's national ID number. The system checks the format of your entry against the default format from the National ID Type Table.
Primary ID	Select if the national ID is the employee's primary ID. If this is the only data row for this person, the system selects the check box by default.
Employment Information	During the COBRA processing, automatically populates with the original data of the employee that experienced the COBRA event.
Job Information	Review and update a historical record of the non-employee participant's business unit and department affiliations.

Converting Non-Employee Individual Coverage to Dependent Coverage

When a spouse or ex-spouse COBRA participant enrolls in individual non-employee COBRA coverage, the child dependents of the employee are inherited as dependents for the non-employee.

All non-employee participants are assigned a unique system-generated employee ID, for which the numbering convention is established in the Installation Table. All dependents of the non-employee participant also have this new COBRA employee ID, along with their original dependent/beneficiary ID.

When a secondary event occurs, however, all of an employee's dependents become independently covered. For example, a former employee elects COBRA coverage for himself, his spouse, his son, and his daughter. He later dies, which qualifies as a secondary event for the dependents. The spouse, son, and daughter all become non-employee participants, and are assigned IDs as shown in the following table.

Person	Employee ID	Dependent/Beneficiary ID
Employee (Deceased)	Z001	00
Spouse (Non-employee)	C00015	01
Son (Non-employee)	C00016	02
Daughter (Non-employee)	C00017	03

If no further action is taken, the system creates COBRA health benefit records with employee-only coverage for the spouse and dependents, with their COBRA coverage extended to a total of 36 months from the initial event.

However, the spouse can also enroll the children as dependents under her coverage. To change from independent coverage for non-employees to dependent coverage, follow the steps below.

To convert non-employee independent coverage to non-employee dependent coverage:

1. Access the COBRA health benefit record for the non-employee who's remaining independently covered.
2. Change the coverage code to an appropriate coverage code for dependent coverage for the plan types affected and add the dependent IDs to cover.
3. Access the Participation Termination page and create Voluntary Termination records for the dependents that are now covered under the spouse. The termination date for each termination record should be the same date that dependent coverage begins.

See Also

Chapter 16, "Managing COBRA," Managing COBRA Benefit Plan and Dependent Information, page 238

Terminating COBRA Coverage

COBRA can be terminated:

- Automatically, when the COBRA coverage end date is reached.
- Manually, when the COBRA participant fails to pay bills or requests to terminate coverage ahead of the scheduled end date.

This section describes how to:

- Manually terminate COBRA coverage.

- Send termination letters.

Pages Used to Terminate COBRA Coverage

Page Name	Object Name	Navigation	Usage
Participant Term	COBRA_PARTIC_TERM	Benefits, Administer COBRA Benefits, Terminate COBRA Coverage, Terminate Participant	Manually terminate COBRA coverage if bills are unpaid or on participant's request.
Termination Ltr (termination letter)	RUNCTL_CBR003	Benefits, Administer COBRA Benefits, Terminate COBRA Coverage, Create Termination Letter	Send letters to COBRA participants with plans about to expire.

Manually Terminating COBRA Coverage

Access the Participant Term page.

Participant Term							
Mapin,George N		EmplID: KU0115		Ben Rcd#: 0		COBRA Event ID: 1	
Dep/Benef: 00		Mapin,George N		COBRA Emplid: KU0115			
COBRA Election: Elect				Election Date: 03/15/2000			
Participant Elections							
Plan Type	COBRA Election	Election Date	Coverage Begin Date	Coverage End Date	Enrollment Status	Termination Date	Termination Reason
10	Elect	03/15/2000	03/01/2000	08/31/2001	Enrolled		Not Terminated
11	Elect	03/15/2000	03/01/2000	08/31/2001	Enrolled		Not Terminated
60	Elect	03/15/2000	03/01/2000	08/31/2001	Enrolled		Not Terminated

Participant Term page

For each plan type to terminate, enter the Termination Date and Reason.

When you save this page, the Coverage End Date of the enrolled plan type is adjusted to the termination date.

Sending Termination Letters

Access the Termination Ltr page.

Termination Ltr

Run Control ID: GN2 [Report Manager](#) [Process Monitor](#) **Run**

Start Date:

End Date:

Reprint Parameters

☐ Reprint Letter

☐ 'Reprint' Appears on Letters

Reprint ID:

Termination Ltr page

Termination letters are printed for employees whose coverage ends during the period between the start and end dates.

See Also

PeopleSoft 8.8 Application Fundamentals for HRMS PeopleBook, “Generating Form Letters”

PeopleSoft 8.8 Application Fundamentals for HRMS PeopleBook, “PeopleSoft Application Fundamentals for HRMS Reports,” Manage Base Benefits Reports

Manually Enrolling Participants in COBRA Coverage

You can bypass the automated COBRA Administration batch process and force the system to enroll employees and dependents into COBRA health benefits.

When you bypass the batch process, participants do not require COBRA-qualifying events in order to be eligible for COBRA benefits. Instead, the system automatically gives all participants enrolled in COBRA coverage through these pages a COBRA event ID of 900.

Note. When you manually enroll an employee or dependent in COBRA coverage, subsequent COBRA processing, such as secondary event processing, is not aware of the manually enrolled COBRA coverage. When you add a non-employee through COBRA, the non-employee record may not show in other PeopleSoft Human Resources processes until the Refresh Personal Data process is run.

Warning! Because these pages ignore the processing rules that regulate COBRA coverage eligibility, manually process COBRA coverage only after careful consideration.

This section describes how to:

- Manually change employee dependents to non-employees.

- Manually assign participants to benefit programs.
- Manually enroll participants in benefit plans.
- Manually enroll dependents in benefit plans.

See Also

Chapter 16, “Managing COBRA,” Managing COBRA Benefit Plan and Dependent Information, page 238

Chapter 16, “Managing COBRA,” Managing Non-Employee COBRA Participants, page 243

PeopleSoft 8.8 Human Resources PeopleBook: Administer Workforce, “Updating Workforce Information”

Pages Used to Manually Enroll Participants in COBRA Coverage

Page Name	Object Name	Navigation	Usage
Non-Employee	CBR_MANUAL_ENT1	Benefits, Administer COBRA Benefits, Maintain COBRA Non-Employees, Create COBRA Non-Employee	Manually establish an employee dependent as a non-employee, in preparation for manually enrolling the dependent into COBRA coverage.
Program Partic (program participation)	CBR_MANUAL_PARTIC1	Benefits, Administer COBRA Benefits, Enroll Manually, Assign Benefits Program	Manually assign an employee or COBRA non-employee to a benefit program or make changes to that manual assignment over time.
Elections	CBR_MANUAL_HEALTH1	Benefits, Administer COBRA Benefits, Enroll Manually, Select Health Benefits	Manually enroll participants in COBRA health benefits.
Dependents	CBR_MANUAL_HEALTH2	• Benefits, Administer COBRA Benefits, Enroll Manually, Select Health Benefits • Click the Dependents tab.	Manually enroll dependents in COBRA health benefits.

Manually Changing Employee Dependents to Non-Employees

Access the Non-Employee page.

EmplID (employee ID) and **Empl Rcd#** (employee record number) Enter the ID and employee record number for the employee that the non-employee participant is a dependent or beneficiary of.

Dep/Benef (dependent/beneficiary) Enter the dependent or beneficiary number.

COBRA Event Date Enter the event date for the non-employee participant’s COBRA enrollment.

Save and Add Next Click to save the information. A message appears informing you of the COBRA employee ID assigned to this person.

Take note of the new employee ID for the COBRA non-employee and click OK.

Manually Assigning Participants to Benefit Programs

Access the Program Partic page.

The benefit program is assigned a COBRA event ID of 900.

Manually Enrolling Participants in Benefit Plans

Access the Elections page.

The health benefit record of the selected participant receives a COBRA Event ID of 900.

Coverage Begin Date	Automatically set to the current date.
Coverage Election	Elect or terminate a benefit plan.
Option	The system displays the COBRA option that goes with the selected benefit plan.
Health Provider ID	Enter the name of the employee's doctor, an ID number, or any other format that the health provider may require.
Previously Seen	Select to indicate that the employee is a current patient of the indicated physician. Becomes available when you enter a health provider ID.
HIPAA Report Date (Emp)	Displays the date that the employee's certificate of creditable health coverage was printed, if health coverage was terminated. These certificates are guaranteed to employees by the Health Insurance and Accountability Act of 1996, and you can print them by running HIPAA Reports.

Note. The certificate of creditable coverage lists all group health coverage that an employee had for the 12 month period prior to the date that coverage ended.

Manually Enrolling Dependents in Benefit Plans

Access the Dependents page.

Relationship	Identifies the dependent's relationship to the participant.
Dependent ID	Select the dependent ID to add available beneficiaries to the selected COBRA participant/plan type/benefit plan combination.
Health Provider ID	Enter the name of the employee's doctor, an ID number, or any other format that the health provider may require.
Previously Seen	Select to indicate that the employee is a current patient of the indicated physician. Becomes available when you enter a health provider ID.

CHAPTER 17

Processing Retroactive Benefits and Deductions

This chapter provides an overview of retroactive benefits and deductions and discusses how to:

- Trigger individual retroactive benefit/deduction requests.
- Trigger mass retroactive benefit/deduction requests.
- Handle duplicate requests.
- View retroactive benefit/deduction requests.
- Calculate retroactive benefits and deductions.
- Review and update calculated retroactive benefits and deductions.
- Load calculations into PeopleSoft Payroll for North America.

See Also

Chapter 6, “Setting Up Additional Human Resources Base Benefits Features,” Setting Up Retroactive Benefits and Deductions, page 107

Understanding Retroactive Benefits and Deductions

A retroactive change to employee or benefit-related data has an effective date prior to the last confirmed pay end date of the employee’s pay group. Retroactive changes to benefits and deductions might become necessary for a variety of reasons: late paperwork, data-entry errors, modified union contracts, and changes to employment laws, for example.

Base Benefits retroactive benefits and deduction features flag these events internally and create retroactive benefit/deduction requests that you can view by employee.

Triggers for individual events and mass events are defined differently. The system identifies individual events without any user intervention, while mass event processing occurs only by user request.

Note. Retroactive benefits and deductions features are only available if you also use PeopleSoft Payroll for North America. PeopleSoft Payroll for North America processes are used to calculate retroactive benefits and deductions and load retroactive benefit/deduction totals to payroll.

Triggering Individual Retroactive Benefit/Deduction Requests

Retroactive changes to the following pages and fields trigger PeopleCode to automatically generate an individual retroactive benefit/deduction request:

Application Component	Page	Trigger Fields
Maintain Payroll Data	General Deduction Data	All Fields
Administer Base Benefits	Health Benefits	All Fields
	Life and AD/D Benefits	All Fields
	Disability Benefits	All Fields
	Vacation Benefits	All Fields
	Benefit Program Participation	All Fields
Administer Workforce	Job Data 1	Effective Date
	Job Data 3	Comp Frequency Compensation Rate Change Amount Change Percent Annual Benefits Base Rate
	Benefit Program Participation	All Fields

Note. With Benefits Administration, retroactive changes can be made to the above pages and fields as a result of Open Enrollment or Event Maintenance. System requests for retroactive benefits and deductions are created exactly as if you had made these changes manually.

(USF) Pages That Trigger Individual Retroactive Benefit and Deduction Requests

Application Component	Page	Trigger Fields
Maintain Payroll Data (USF)	General Deduction Data	All Fields
Administer Base Benefits (USF)	FEHB Benefits	All Fields
	FEGLI Benefits	All Fields
	Benefit Program Participation	All Fields

Application Component	Page	Trigger Fields
Administer Workforce (USF)	PAR - Data Control	Effective Date
	Current Job - Compensation	Comp Frequency Compensation Rate Change Amount Change Percent Annual Benefits Base Rate
	Current Job - Benefit Program Participation	All Fields
	PAR - Compensation Data	Pay Rate Determinant Pay Basis Base Pay FEGLI Base

Triggering Mass Retroactive Benefit/Deduction Requests

This section discusses how to:

- Create a mass retroactive benefit/deduction program and define the request.
- Run the Mass Retro Request (mass retroactive request) process.

See Also

[Chapter 6, “Setting Up Additional Human Resources Base Benefits Features,” Setting Up Retroactive Benefits and Deductions, page 107](#)

Page Used to Define Mass Retroactive Benefit /Deduction Requests

Page Name	Object Name	Navigation	Usage
Run Retro Ben/Ded (run retroactive benefit/deduction)	RUNCTL_RTRODEDMASS	North American Payroll, Retroactive Payroll, Benefits/Deductions, Initiate Mass Retro Processing	Generates mass retroactive benefit/deduction requests.

Creating a Mass Retroactive Benefit/Deduction Program and Defining the Request

Use the Retroactive Benefit/Deduction Table to set up:

- A mass retroactive benefit/deduction program.
- A mass retroactive benefit/deduction request with selection criteria that involve the benefit program changes.

See Also

Chapter 6, “Setting Up Additional Human Resources Base Benefits Features,” Setting Up Retroactive Benefits and Deductions, page 107

Running the Mass Retro Request Process

Access the Run Retro Ben/Ded page.

Pay Calendar Validation

Select to validate that the selected employees are hired into a confirmed pay calendar before generating a request for them.

Clear to select employees who have been placed in a special pay group that does not yet have a confirmed pay calendar.

Handling Duplicate Requests

A request that affects the same retroactive benefit/deduction information as a previous request is considered a *duplicate request*.

The duplicate resolution process differs, depending upon the types of request involved (individual or mass) and the status of the initial request.

Individual Requests

When the system encounters duplicate individual requests with different effective dates, it attempts to use earlier date for processing.

When a duplicate individual request is triggered and the initial individual request is not processed, the system compares the effective dates of the two requests, keeps the request with the earlier effective date, and deletes the request with the later effective date.

If the initial request is calculated, the system compares the effective dates of the two requests, marks the previously calculated request *Not OK to Process*, sets the status to *Invalidated*, sets the Duplicate Flag to *Y* (yes), and gives the new request the earlier of the two effective dates.

Mass Requests

For duplicate mass requests, the system checks the status of the initial request. If it is *Not Processed* or *Calculated*, the system marks both requests *Not OK To Process*. You'll have to examine both requests and decide which one to run.

This process is also followed when one of the duplicate requests (either the original or the duplicate) is an individual request, while the other is a mass request.

See Also

[Chapter 17, “Processing Retroactive Benefits and Deductions,” Reviewing and Updating Calculated Retroactive Benefits and Deductions, page 258](#)

Viewing Retroactive Benefit/Deduction Requests

You can view requests by employee, mass retroactive request ID, effective date, or process status.

Page Used to View Retroactive Benefit/Deduction Requests

Page Name	Object Name	Navigation	Usage
Retro Ben/Ded Rqst (retroactive benefit/deduction request)	RETRODED_RQST_SUMM	North American Payroll, Retroactive Payroll, Change Status/Review Info, Ben/Ded Request Summary	View retroactive benefit/deduction requests by employee, mass retro request ID, effective date, or process status.

Viewing Retroactive Requests

Access the Retro Ben/Ded Rqst page.

Retro Ben/Ded Rqst

EmplID: FRG7125 LaPerle,Renee
Empl Rcd#: 0

Retroactive Deduction Requests Summary
[Find](#) | [View All](#) First ◀ 1 of 1 ▶ Last

Retro Effective Date:	01/01/1993	Process End Date:	09/17/2001
Retro Request Type:	Ben Ded	Mass Request ID:	
Retro Program ID:	KU1	Duplicate Flag:	N
Retro Sequence#:	123936	Process Flag:	Not Proc
Plan Type:	20	Deduction Code:	
Benefit Plan:	FBASLF		

Retro Ben/Ded Rqst. page

Retro Effective Date and Process End Date

Displays the date range for which retroactive benefits and deductions will be calculated.

Retro Request Type

Displays the action that generated the request. Possible types include:

- *Benefit Deduction.*
- *General Deduction.*
- *Job Change.*
- *Mass Request.*

Retro Program ID

The retroactive benefit/deduction program that the request is validated against.

Only one retro program ID is defined for individual requests, which are generated online. If the employee was selected through a mass request, the mass request's mass request ID is displayed.

Duplicate Flag

Automatically set to *Y* when a duplicate request is identified.

Retro Sequence #
(retroactive sequence number)

A system-assigned sequence number that links retroactive benefit/deduction requests with actual retroactive benefits and deductions.

Process Flag

Indicates the processing status of the request. Values include:

- *Not processed:* The request has been triggered but no processing has occurred.
- *Extracted:* The request is in the middle of the calculation process.
- *Calculated:* The request has been successfully run through the calculation process.
- *Loaded to Payroll:* The request has been successfully run loaded to payroll.
- *Invalidated:* The request is a duplicate individual request.
- *Rejected:* The request cannot be processed because it contains incorrect data.

Plan Type

Appears only for requests that involve changes to general deduction and benefit plan information

Deduction Code

Appears only for requests that involve changes to general deduction information.

Benefit Plan

Appears only for benefit plan-related requests.

See Also

Chapter 6, "Setting Up Additional Human Resources Base Benefits Features," Setting Up Retroactive Benefits and Deductions, page 107

Calculating Retroactive Benefits and Deductions

For each pay period after the process start date through the process end date, the retroactive benefit/deduction calculation process determines:

- The original benefit and deduction amounts.

- The retroactive benefit and deduction amounts.

This section discusses how to:

- Run the Retroactive Benefits and Deductions process.
- View error messages.

Pages Used to Calculate Retroactive Benefits and Deductions

Page Name	Object Name	Navigation	Usage
Run Retro Ben/Dedn (run retroactive benefit/deduction)	RUNCTL_RTRODEDCALC	North American Payroll, Retroactive Payroll, Benefits/Deductions, Calculate Retro Dedn Amounts	Set up calculation processes for individual and mass retroactive benefit/deduction requests.
Retro Ben/Ded Proc (retroactive benefit/deduction process)	RETRODED_MESSAGES	North American Payroll, Retroactive Payroll, Change Status/Review Info, Ben/Ded Processing Messages	View error messages for the calculation process.

Running the Retroactive Benefits and Deductions Process

Access the Retro Ben/Dedn page.

Individual and Mass

Select to run an individual or a mass request. You can run all requests or a request associated with a specific ID.

To process several individual employees, you need to set up multiple run controls for each, then run the process several times.

Viewing Error Messages

Access the Retro Ben/Ded Proc page.

Retro Ben/Ded Proc

EmplID:
Line #: 0 **Company:** **Empl Rcd#:** 0
Page #: 0 **Pay Group:** **Retro Seq#:** 123908
☐ **Off Cycle** **Pay End Date:** 01/01/2000 **Separate Check #:** 0

Retroactive Deduction Messages
Find | View All
First 1 of 1 Last

Message ID: 008203
Comments: Request is rejected. No data available to do Retro Deductions.
Message Data: J

Retro Ben/Ded Proc page

You can select specific sets of error messages on this page. The system prompts you to search for error messages based on aspects of the retroactive benefit/deduction requests involved. For example, you can select error messages for retroactive benefit/deduction requests that have a specific company, pay group, and pay end date combination.

Reviewing and Updating Calculated Retroactive Benefits and Deductions

This section discusses how to review calculation details and override deduction totals.

Pages Used to Review and Update Calculated Retroactive Benefits and Deductions

Page Name	Object Name	Navigation	Usage
Retro Ben/Ded Calc (retroactive benefit/deduction calculation)	RETRODED_DEDS	North American Payroll, Retroactive Payroll, Benefits/Deductions, Review/Update Calculations	Review individual line items for each pay end date and override deduction amounts.
Retro Ben/Ded Summ (retroactive benefit/deduction summary)	RETRODED_SUMMARY	North American Payroll, Retroactive Payroll, Change Status/Review Info, Ben/Ded Deduction Amt Summary	View summaries of calculation totals.

Reviewing Calculation Details and Overriding Deduction Totals

Access the Retro Ben/Ded Calc page.

Retro Ben/Ded Calc			
EmplID:	FRG7125	LaPerle,Renee	
Empl Rcd#:	0	Retro EffDt:	01/01/1993
Mass Rqst ID:		Retro Seq#:	123936
		Status:	Not Proc
		Duplicate Flag:	N
Retroactive Deduction Data			
		Find View All	First 1 of 1 Last
Company:	Benefit Program:	Old Ded Amount:	0.00
Pay Group:	Plan Type:	New Ded Amount:	0.00
Pay End Date:	Benefit Plan:	Override Ded Amt:	
Page #:	Coverage Code:	Retro Ded Amount:	0.00
Line #:	Deduction Code:	☐ OK To Process	
	Deduction Class:	☐ Off Cycle	☐ Exception

Retro Ben/Ded Calc page

Retroactive Deduction Data Results are broken up by pay end date and then further by deduction code and deduction classification.

Use the scroll arrow to see calculations for each available combination.

Pay End Date

Derived from the employee's actual pay history, unless none exists. This can happen if the employee is a retroactive hire, for example. In these cases, the pay end date from the appropriate pay calendar is used.

Company, Pay Group, Benefit Program, Plan Type, Benefit Plan, Coverage Code, Deduction Code, Deduction Class, Page # (page number), Line # (line number), and Off Cycle

Populated with values from the employee's actual pay history.

If the employee has no pay history, the data is obtained from the job row effective for the selected record's pay end date. The page number and line number are set to zero, and the Off Cycle box is cleared.

Old Ded Amount (old deduction amount)

Shows the actual amount that was calculated in the displayed pay period for the displayed deduction code and deduction class.

New Ded Amount (new deduction amount)

Shows the amount that should have been deducted, according to the current data.

Override Ded Amount (override deduction amount)

Enter a new amount to override the New Ded Amount value.

Note. To enter a new amount, the request must have reached *Calculation* status, but cannot have reached *Loaded* status.

Retro Ded Amount

Displays the difference between the new and old deductions.

Exception

Selected for duplicate requests.

OK To Process

Selected for all requests that aren't duplicates.

Note. Use the scroll arrow to see calculation amounts for each deduction code / deduction classification combination.

See Also

Chapter 17, “Processing Retroactive Benefits and Deductions,” Handling Duplicate Requests, page 254

Loading Calculations Into PeopleSoft Payroll for North America

This section discusses how to:

- Run the payroll load process.
- Process payroll for retroactive benefits and deductions.

Pages Used to Load Calculations Into PeopleSoft Payroll for North America

Page Name	Object Name	Navigation	Usage
Run Retro Ben/Ded (run retroactive benefit/deduction)	RUNCTL_RTRODEDPSHT	North American Payroll, Retroactive Payroll, Benefits/Deductions, Post Dedn Amounts to Paysheets	Load retroactive benefit/deduction calculations into payroll.

Running the Payroll Load Process

Access the Run Retro Ben/Ded page.

Warning! Before loading retroactive benefits and deductions to payroll, you must first run Paysheet Creation to create paysheets with normal pay for this period.

You can load employee retroactive benefit calculations by pay run ID or by company, pay group, and pay end date. You can use either method to process an off-cycle pay run; use the pay run ID method for on-cycle pay runs.

Note. Off-cycle payroll runs are generally used to handle one-time deduction refunds, and the resulting refunds are delivered on separate checks from the regular payroll checks received by employees. You should process off-cycle retroactive benefits and deductions in conjunction with off-cycle retroactive pay processing. When you load benefits or deductions for a particular retroactive benefit/deduction program to PeopleSoft Payroll for North America, the on- or off-cycle selection here must match the selection for the same program on the Retroactive Benefit/Deduction Table.

Use the same pay run ID that you set up in your regular on-cycle or off-cycle pay run. The employees included under the ID must:

- Have already had their retroactive benefits and deductions calculated through the Retroactive Benefit/Deduction Calculation process.
- Have at least one of their calculated benefits and deductions marked *OK To Process* on the Retro Ben/Ded Calc page.

For the company, pay group, or pay end date method, if you leave a field empty, the system processes all appropriate values for that field during the load.

Select Process Terminated Employees to have paysheets created for employees who are receiving refunds and have been retroactively terminated.

See Also

Chapter 6, “Setting Up Additional Human Resources Base Benefits Features,” Setting Up Retroactive Benefits and Deductions, page 107

PeopleSoft 8.8 Payroll for North America PeopleBook

PeopleTools PeopleBook: Process Scheduler

Processing Payroll for Retroactive Benefits and Deductions

After calculations are loaded, PeopleSoft Payroll for North American processes the retroactive benefits and deductions in the next payroll cycle. Retroactive benefits and deductions owed to the employer are collected via arrears processing. You can use the arrears processing pages to control how much money is deducted from employee paychecks.

For on-cycle processing, retroactive benefits owed to the employee are reimbursed in the next paycheck. If you’ve used off-cycle processing, refunds are delivered in a separate check.

Note. You can use the Retro Ben/Ded Review page to review the results of the Retroactive Benefit/Deduction Payroll Load process at any time after it has been run. The status of the request is *Loaded to Payroll*.

See Also

Chapter 6, “Setting Up Additional Human Resources Base Benefits Features,” Setting Up Retroactive Benefits and Deductions, page 107

CHAPTER 18

Managing Multiple Jobs

This chapter provides an overview of multiple jobs and discusses how to:

- Change primary job data.
- Automatically build primary job data for multiple employees.

Understanding Multiple Jobs

Many organizations have employees that work in more than one job at the same time. Calculating benefit deductions and determining benefit eligibility requires special considerations. When an employee is hired into another position, Human Resources uses Assign Additional Job in Workforce Administration, Job Information. Each job is assigned an employee record number and a benefit record number.

A benefit record number is used to group several jobs together for benefit purposes. Each employee record number is unique. However, a benefit record number can be assigned to multiple employee record numbers.

- If the new job entitles the employee to a new set of concurrent benefits, use a new benefit record number.
- If the job does not entitle the employee to new benefits, use an existing benefit record number.

Each benefit record number must have a designated *primary job*. The primary job is used to process benefit information.

- Service and termination dates are pulled from the primary job and used by the deduction processes.
- During deduction processing, the primary job determines when a deduction should be taken from an employee's check.

Warning! Do not confuse the Benefits-related Primary Job with the Primary/Secondary Job Indicator found on the Workforce Administration, Job Data pages. These are separate fields with very different functionality.

For Benefits Administration the primary job is used to:

- Supply company and BAS (Benefits Administration) group data to the processing schedule. If a schedule specifies a particular BAS group ID, then the BAS group ID of the primary job within a benefit record number determines whether that employee's benefit record number is processed by the schedule.
- Determine how credits (additional pay) for benefits are paid.

You need to determine how to group jobs for calculating benefit deductions or determining benefit eligibility. For example, suppose a professor has three jobs:

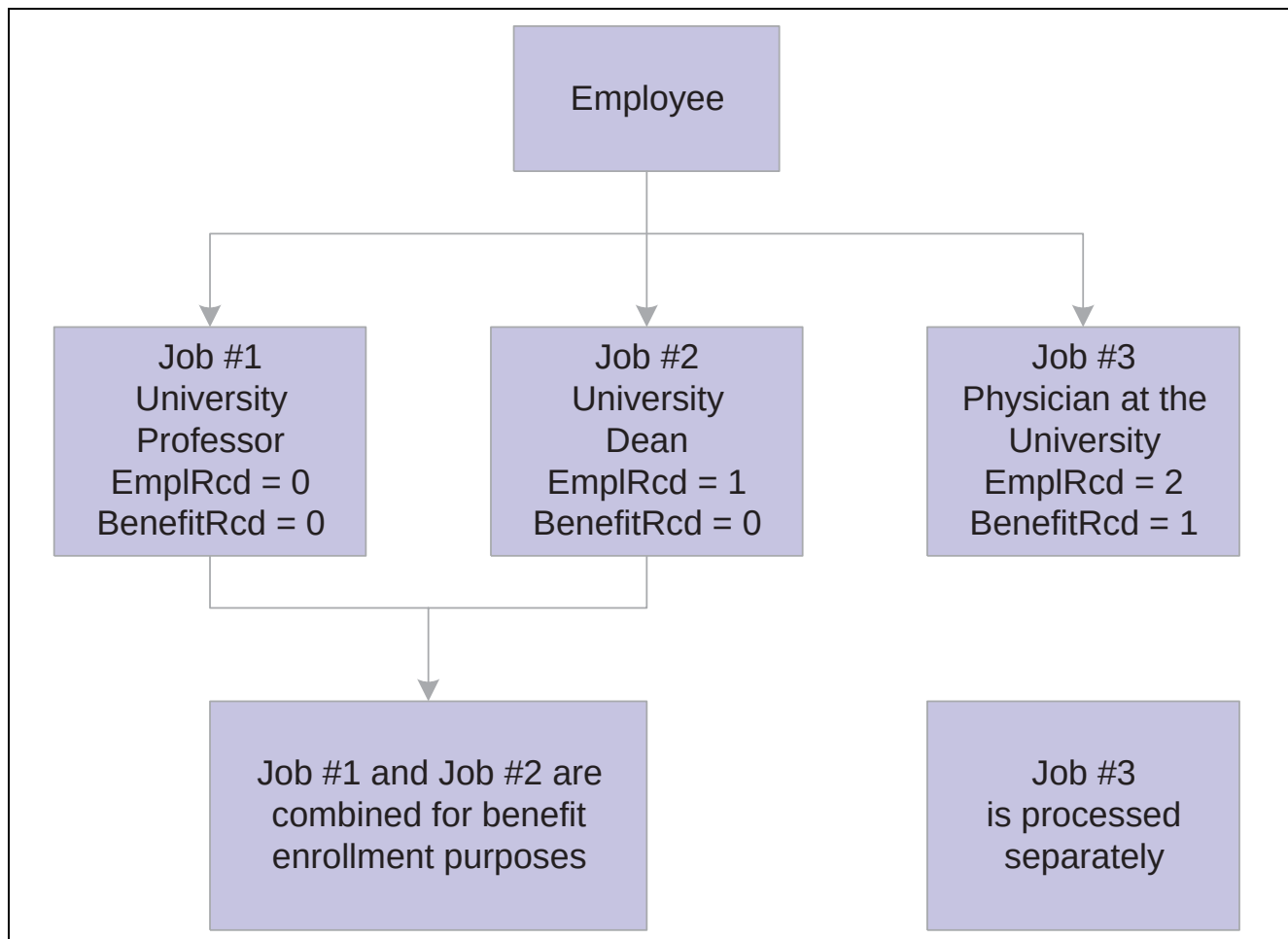
- A dean at a college.

- A faculty member at the college.
- A physician at a hospital associated with the college.

When the professor's job data is entered in Administer Workforce, the system updates the Primary Jobs Table with information regarding the relationships between jobs and their benefit groups. For example, the following attributes might result:

Job Description	Employee Record #	Benefit Record #	Primary Job Indicator	Include for Eligibility	Include for Deductions
Professor	0	0	Yes	Yes	Yes
Dean	1	0	No	Yes	Yes
Physician	2	1	Yes	Yes	Yes

The following diagram shows the employee's three jobs and two benefit records. Each benefit record corresponds to a set of benefits enrollments.



An employee with three jobs and two benefit records

You can set default rules on the Multiple Jobs Options page to determine the setting and management of these options automatically for hires, rehires, and terminations.

See Also

PeopleSoft 8.8 Human Resources PeopleBook: Administer Workforce, “Hiring Your Workforce”

Chapter 6, “Setting Up Additional Human Resources Base Benefits Features,”
Setting Up Multiple Jobs, page 104

Changing Benefit Record Numbers

It is best not to change the benefit record number of an existing job. Doing so invalidates primary job indicators on the effective-dated Primary Jobs Table and can result in erroneous processing within PeopleSoft Benefits Administration and PeopleSoft Payroll for North America, which may lead to abnormal termination of some processes.

Whenever changes are made through the Job Data, Assign Additional Jobs, or Current Job components, the system checks that only one job within a given benefit record is designated as the primary job. If the system finds a problem, such as no primary job or multiple primary jobs, a worklist entry tells the benefits administrator to run the Primary Jobs Audit Report.

See Also

Chapter 6, “Setting Up Additional Human Resources Base Benefits Features,”
Setting Up Multiple Jobs, page 104

Understanding Multiple Jobs Data and Calculating Deductions

To calculate deductions for multiple jobs, the system needs to know the job or jobs that contribute salary information for calculating the deduction or coverage amount for salary-based plans.

To keep track of this information, the system uses the:

- Primary Jobs Table, which is automatically maintained whenever a job is added using the Assign Additional Jobs pages or whenever a job is terminated or rehired. This table indicates whether a job is:
 - Included for Benefits Administration eligibility processing.
 - Included in the deduction calculation.
 - The primary job.
- Multiple Jobs Options Table, which holds the rules that are used to automatically set the flags in the Primary Jobs Table in response to a hire, rehire, or termination. You can override these flags on the Primary Jobs Maintenance page.
- Calculation rules, which specify how to add the employee’s jobs together during the deduction calculation process.

Even if Multiple Jobs processing is not enabled, the system populates the Primary Jobs Table whenever employees are hired; you then have a base of primary job data if you later decide to enable multiple jobs.

Understanding Calculation Rules

The calculation rules specify how to group jobs when calculating deductions based on an employee's salary. The following fields determine deduction or coverage amounts for salary-based plans:

- Combine Salaries check box on the Calculation Rules Table.
- Grouping Method on the Calculation Rules Table.
- Deductions check box on the Primary Jobs Table.

The primary job indicator controls the frequency of benefit deductions. Nonearnings-based benefit deductions (for example, rate-based deductions) are taken only when the primary job for the enrollment's benefit record is part of the payroll calculation. Benefit deductions that are based upon actual employee earnings, such as savings, retirement, or pension plans, are taken according to how those plans are set up, or in some cases, according to the contribution method—either percentage of earnings or a flat amount—that the employee selects upon enrollment.

- If the contribution is based on a percentage, the deduction is taken on every check that the employee receives for all jobs for the benefit record associated with the enrollment.
- If the contribution is based on a flat amount, the deduction is taken only when the primary job for the enrollment benefit record is paid.

Summary of Calculating Deductions by Plan Type

Here's how these fields are used to calculate coverage and deductions for each plan type series:

Plan Type	Basis/Type	Usage
Health (1x)	Flat amount or compensation rate based	To calculate the premium if a Salary Rate Table is specified, salaries are combined using the Include flag for each job along with the combination parameters on the Calculation Rule Table.
Life/AD&D (2x)	Flat amount or compensation rate based	If the coverage is based upon a factor of salary, salaries are combined using the Include flag for each job along with the combination parameters on the Calculation Rule Table. If a Salary Rate table is specified, salaries are combined using the Include Flag along with the combination parameters on the calculation rule, in order to calculate the premium.

Plan Type	Basis/Type	Usage
Disability (3x)	Flat amount or compensation rate based	To determine coverage, salaries are combined using the Include flag for each job along with the combination parameters on the Calculation Rule Table. To calculate the premium if a Salary Rate table is specified, salaries are combined using the Include flag for each job along with the combination parameters on the Calculation Rule Table.
Savings (4x)	Flat amount or earnings-based	The combination parameters on the Calculation Rules Table, as well as the Include for Deductions flag, are ignored: all jobs within the benefit record contribute earnings to the deduction and limits. Savings plans contributions can be expressed as either a flat amount or a percentage of eligible earnings (controlled by special accumulators). Contributions expressed as a percentage of eligible earnings are calculated based upon the earnings from all jobs in the enrollment's benefit record number in the current check, without regard to the setting of the Include flag for each job. Limits are determined using year-to-date deductions across all benefit record numbers.
Leave (5x)	N/A	Not applicable. There is no coverage amount and no deduction with these plans.
FSA (6x)	Flat amount	Not applicable. There is no coverage amount, and deductions are not based upon salary or earnings.

Plan Type	Basis/Type	Usage
Retirement (7x)	Earnings-based	The combination parameters on the Calculation Rules Table, as well as the Include for Deductions flag, are ignored: all jobs within the benefit record contribute earnings to the deduction. Contributions are expressed as a percentage of eligible earnings (controlled by a special accumulator), and are calculated based upon the earnings from all jobs in the enrollment's benefit record number, in the current check. Limits (if any) are determined using year-to-date deductions across all benefit record numbers.
Pension (8x)	Earnings-based	The combination parameters on the Calculation Rules Table, as well as the Include for Deductions flag, are ignored: all jobs within the benefit record contribute earnings to the deduction. Contributions expressed as a percentage of eligible earnings are calculated based upon the earnings from all jobs in the enrollment's benefit record number, in the current check. Limits (if any) are determined using year-to-date deductions across all benefit record numbers.
Vacation Buy/Sell (9x)	CompRate-based	Calculation rules are not used for these plans, and the Include flag is ignored. The cost is calculated by adding compensation rates across all active jobs in the enrollment's benefit record number.

See Also

Chapter 3, "Setting Up Core Human Resources Base Benefits Tables," Setting Up Rates and Premium Limits, page 21

Chapter 3, "Setting Up Core Human Resources Base Benefits Tables," Setting Up Calculation Rules, page 26

Changing Primary Job Data

Changing an employee's Primary Job Indicator, Include for Eligibility flag, or Include for Deductions flag can affect deduction calculation and processing, and benefit eligibility in Benefits Administration. This section describes how to:

- Change primary job data.
- View job details.

Pages Used to Maintain Primary Job Data

Page Name	Object Name	Navigation	Usage
Primary Jobs Flags	BN_PRIJOBS_MAINT	Benefits, Maintain Primary Jobs, Maintain Flags	Manually change an employee's Primary Job Indicator, the Include for Eligibility flag, and the Include for Deductions flag.
Job Data	BN_ADDL_DATA_INQ	Click Details in the Primary Jobs Flags Maintenance group box.	View job details.

Changing Primary Job Data

Access the Primary Jobs Flags page.

Primary Jobs Flags

Employee ID: B-BU131 Ratliff, Maxine
Currently Displayed Effective Date set: 04/01/1999
 Browse Primary Job History by Effective Date  [Insert New Effdt](#)

Primary Job Flags Maintenance
Customize | Find | 
First  1 of 1  Last

Job Data	Employee Rcd Nbr	Effective Date	Benefit Record Number	Primary Job	Include Eligibility	Include Deductions	
Detail	0	04/01/1999	0	☒	☒	☒	

Primary Jobs Flags page

Because the settings on this page are critical to the proper operation of PeopleSoft Benefits Administration and PeopleSoft Payroll for North America, PeopleCode handles most of the data manipulation in the database.

Use the forward and reverse buttons to navigate through the different effective dates where changes to the primary jobs data have occurred. Add a new row to change the primary job designation. When you save the page, PeopleCode turns off the primary job designation of the previously designated job and ensures that all of the rules for data integrity are maintained.

Job Data and Detail

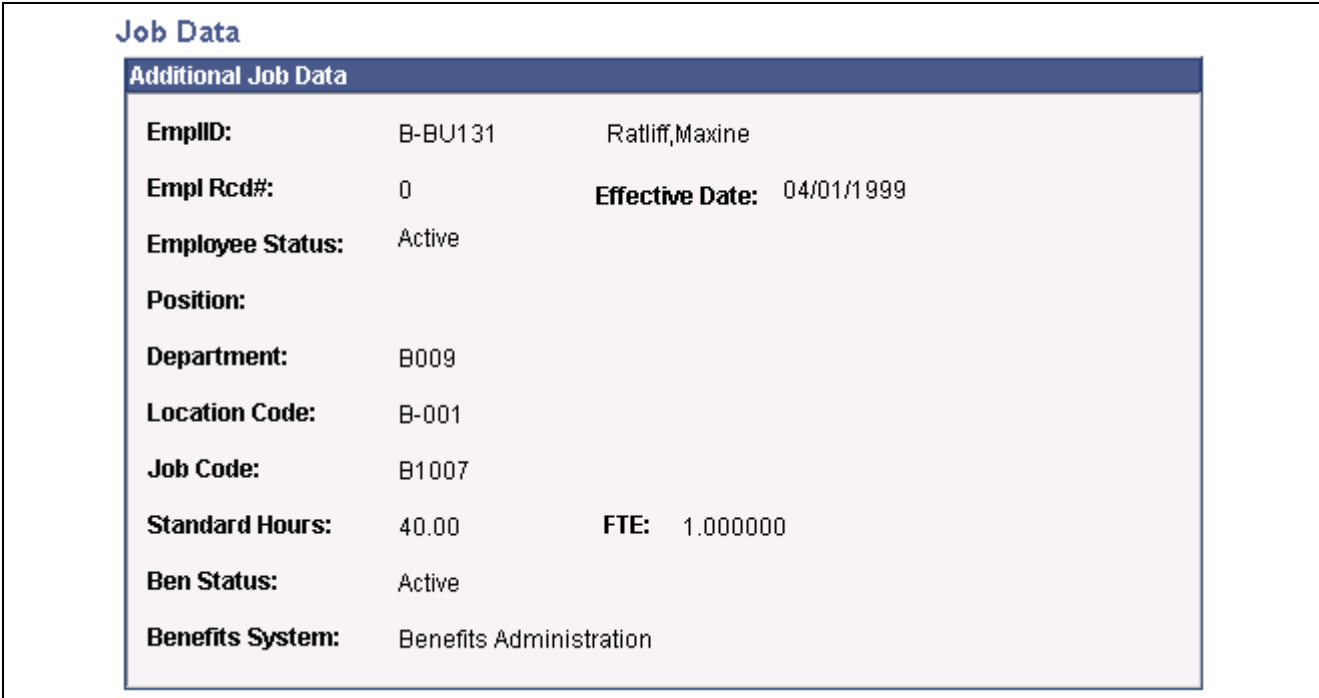
Click Detail to enter additional job information in the Job Data page.

Primary Job	Select this check box if you want this job to be flagged as the primary job for this benefit record number.
Include Eligibility	For Benefits Administration only. Select this check box if you want this job to be included by the system when determining the employee's benefit eligibility.
Include Deductions	Select this check box if you want this job to be included when the system calculates the employee's benefit deduction and coverage.

Note. If you change the Primary Job Indicator or the Include for Deductions flag and Retro Deductions is activated, the system creates a retro/deduction trigger.

Viewing Job Details

Access the Job Data page.



The screenshot displays the 'Job Data' page. At the top, there is a header 'Job Data' in blue. Below it is a table titled 'Additional Job Data' with a dark blue header. The table contains the following information:

Additional Job Data		
EmplID:	B-BU131	Ratliff,Maxine
Empl Rcd#:	0	Effective Date: 04/01/1999
Employee Status:	Active	
Position:		
Department:	B009	
Location Code:	B-001	
Job Code:	B1007	
Standard Hours:	40.00	FTE: 1.000000
Ben Status:	Active	
Benefits System:	Benefits Administration	

Job Data page

The system displays the job information in effect as of the effective date of the selected Primary Jobs entry.

Automatically Building Primary Job Data for Multiple Employees

Once you've established your employee population in the database (Personal Data, Employment, and Job tables have been loaded), use the Primary Job Utility to automatically build Primary Job data for one or more employees. Run the Primary Job Utility process whenever you add a new employee population to the database through an external interface or database load (such as when implementing employee groups in phases or acquiring another company).

Note. When you upgrade your PeopleSoft database from a previous release, the Primary Jobs information is automatically built as part of the upgrade process. There is no need to run this utility after an upgrade unless you've added more employees to the database through an external interface after performing the upgrade.

Page Used to Automatically Build Primary Job Data for Multiple Employees

Page Name	Object Name	Navigation	Usage
Primary Job Maint (primary job maintenance)	RUNCTL_BEN500	Benefits, Maintain Primary Jobs, Rebuild Primary Job Flags	Automatically build primary job information for multiple employees.

Running the Primary Job Utility

Access the Primary Job Maint page.

Primary Job Maint page

When the utility runs, all existing data for the indicated employee population (if any) in the Primary Jobs Table is deleted. For each employee, a new effective-dated entry is made, assigning the primary job designation to the lowest active employee record within a benefit record number. Primary Job information is created for a time span bounded by the earliest and latest job effective dates for all jobs within a benefit record. If all jobs within a benefit record are terminated, the job with the lowest employee record is designated as the primary job.

Warning! All manual changes made through the Primary Jobs Flags page for the selected employee population are lost, because the complete Primary Job history is rebuilt for each employee.

Run Option

Specify which employees to process:

Employees Specified in List: Enter one or more employee IDs in the Employee List group box.

All Employees in the Database: All employees in the Personal Data Table are processed.

Employees in a PS Table: Enter the name of any PeopleSoft table that is defined in the Application Designer and contains an Employee ID field.

Employees in a non-PS Table: Enter a non-PeopleSoft table name that contains an Employee ID field.

CHAPTER 19

Sending Benefit Information

This chapter provides an overview of extracting benefit data and discusses how to:

- Specify the data to extract.
- Run the Enrollment Reporting Snapshot process.
- Understand database record layout details.
- Send data to benefit providers.
- (USF) Send FEHB data to the OPM.

Understanding Benefit Data Extraction

Just as you provide information to employees regarding provider benefit plans, you also provide information to benefit providers about employee changes to plan elections.

Similarly, federal agencies send changes in health plan elections to the OPM.

To send benefits data to providers:

1. Specify the information to extract from your HRMS database.
2. Run the Enrollment Reporting Snapshot program to extract the data and write it to the snapshot tables: BN_SNAP_PER, BN_SNAP_JOB, and BN_SNAP_PLAN.
Run this step only once per reporting period and generate all of your extracts from a single snapshot.
3. Create carrier extract files for your benefit providers.
4. Review the data in the snapshot tables or review a log that contains the date and time that the Enrollment Reporting Snapshot, Carrier Extract, and Carrier Interface Supplier Integration processes were run.

Specifying Data to Extract

You can extract benefit plan types and other benefit-related information, such as deduction amounts, life and disability coverages, implied terminations, and the original enrollment date.

Page Used to Specify Data to Extract

Page Name	Object Name	Navigation	Usage
Enrollment Reporting	BN_SNAP_CONFIG	Set Up HRMS, Product Related, Base Benefits, Enroll Snapshot Options	Define data to extract from the HRMS database.

Defining Data to Extract

Access the Enrollment Reporting page.

The screenshot shows the 'Enrollment Reporting' page. It has a title bar 'Enrollment Reporting'. Below it are two sections: 'Plan Types to Include' and 'Processing Options'. The 'Plan Types to Include' section has a list of checkboxes: Health, Life, FSA, Savings, Pension, Vacation Buy/Sell, Retirement, and Disability. All are checked. The 'Processing Options' section has a list of checkboxes: Include Payroll Deduction Info, Calculate Life/Disability Covg, Include Implied Terminations, and Include Original Enrollment Dt. All are checked.

Enrollment Reporting page

Plan Types to Include

Select only the plan types for which you will create a carrier interface extract or transmit data to through the Carrier Interface Supplier Integration process in eBenefits.

Include Payroll Deduction Info (include payroll deduction information)

Select to include the last deduction taken and the pay end date for each enrollment.

Calculate Life/Disability Covg (calculate life/disability coverage)

Select to have the Enrollment Reporting Snapshot process calculate coverage for life and disability plans using the plan definitions, calculation rules, and the employee's compensation rate or annual benefits base rate.

Include Implied Terminations

Select to include enrollments that are no longer valid because the participant has enrolled in another plan type, waived coverage, or transitioned to COBRA coverage.

Note. This option is used whenever a carrier requires a positive notification of a termination or plan change (some carriers can detect these events simply by noticing a previous enrollment record).

Include Original Enrollment Dt (include original enrollment date)

Select to include an employee's earliest continuous enrollment date in the current, active plan. This applies only to employee-level enrollments and allocations. Changes to coverage codes in health plans, employee-specified

coverage amounts in life and disability plans, or employee contribution amounts do not constitute a change in plan.

Running the Enrollment Reporting Snapshot Process

The Enrollment Reporting Snapshot process extracts data you specified on the Enrollment Reporting page from the HRMS database and writes it to the BN_SNAP_PER, BN_SNAP_JOB, and BN_SNAP_PLAN tables. Each time that you run the Enrollment Reporting Snapshot process, the data in the snapshot tables is cleared and new information is written.

Every time that the Enrollment Reporting Snapshot, or Carrier Report processes are run, a record is written to the BN_SNAP_HIST table. You can review this log using the Run History page.

Page Used to Run the Enrollment Reporting Snapshot Process

Page Name	Object Name	Navigation	Usage
Run Snapshot	RUN_BEN100A	Benefits, Interface with Providers, Refresh Benefits Snapshot	Extract information from Base Benefits tables into the BN_SNAP_PER, BN_SNAP_JOB, and BN_SNAP_PLAN tables.
Run History	BN_SNAP_HIST	Benefits, Interface with Provides, Review Interface Run History	Review a history of when the Enrollment Reporting Snapshot, the Carrier Interface Extract, and the Carrier Interface Supplier Integration processes were run.
Snapshot History Detail	BN_SNAP_HIST_DTL	Click Detail on the Run History page.	Review additional information about the history record.
Enroll Snapshot	BN_SNAP_PLAN	Benefits, Interface with Provides, Review Snapshot Information	Review the information extracted by the Enrollment Reporting Snapshot process.
Enrollment Snapshot Detail	BN_SNAP_PLAN_DTL	Click Detail on the Enroll Snapshot page.	View additional information regarding the selected enrollment or allocation record.

Understanding Database Record Layout Details

The following tables are populated by the Enrollment Reporting Snapshot process and used by the Carrier Interface Extract and Carrier Interface Supplier Integration processes. You need this information when creating a provider-specific SQR extract.

BN_SNAP_PER

This table includes one row per participant (employee, dependent/beneficiary, and so on).

COLUMN	KEY	NOTES
EMPLID	Yes	
DEPENDENT_BENEF	Yes	Blank for employees. Populated for dependents and beneficiaries.
EFFDT	No	The as of date specified by the user on the run control page. The value is the same for every row. Simplifies finding related displays and descriptions.
NAME		
LAST_NAME	Alt	
FIRST_NAME		
NAME_PREFIX		
NATIONAL_ID		Primary national ID. If the employee, dependent, or beneficiary has not been assigned a primary ID, the field is blank.
BIRTHDATE		
SEX		
RELATIONSHIP		Blank for employees.
SMOKER		Y/N
STUDENT		Y/N; Applies only to dependents and beneficiaries.
STUDENT_STATUS_DT		Applies only to dependents and beneficiaries.

COLUMN	KEY	NOTES
DISABLED		Applies only to dependents and beneficiaries.
COUNTRY		
ADDRESS1		
ADDRESS2		
ADDRESS3		
ADDRESS4		
CITY		
NUM1		
NUM2		
HOUSE_TYPE		
ADDR_FIELD1		
ADDR_FIELD2		
ADDR_FIELD3		
COUNTY		
STATE		
POSTAL		
GEO_CODE		
IN_CITY_LIMIT		
HOME_PHONE		

BN_SNAP_JOB

There is one row per employee/benefit record/COBRA event; there are no rows for dependents and beneficiaries. For an employee with multiple jobs, all job-related information is taken from the employee's primary job for the indicated benefit record.

COLUMN	KEY	NOTES
EMPLID	Yes	
BENEFIT_RCD_NBR	Yes	
COBRA_EVENT_ID	Yes	Non-zero indicates a COBRA enrollment event for this employee ID/benefit record number.
EMPL_RCD		Primary job as of the date entered on the run control page.
JOB_EFFDT		Effective date of the primary job on the Job table.
JOB_EFFSEQ		Effective sequence of the primary job on the Job table.
EFFDT	No	The as of date entered on the run control page. The value is the same for every row. Simplifies finding related displays and descriptions.
SERVICE_DT		Primary job.
BENEFIT_PROGRAM		
COMPANY		Primary job.
PAYGROUP		Primary job.
CURRENCY_CD		Currency code for the benefit program.
PAY_SYSTEM_FLG		Primary job.

BN_SNAP_PLAN

This table includes one row per employee-level enrollment and one row per dependent/beneficiary attachment to an enrollment.

Column	Key	Notes
EMPLID	Yes	
DEPENDENT_BENEF	Yes	A blank entry indicates an employee level enrollment. A populated entry indicates a dependent enrollment or beneficiary allocation.
BENEFIT_RCD_NBR	Yes	This is the EMPL_RCD field from the enrollment pages.
COBRA_EVENT_ID	Yes	A non-zero entry indicates a COBRA event for this employee ID/benefit record number.
PLAN_TYPE	Yes	
COVERAGE_ELECT	Yes	Must be a key to allow for implied terminations.
EFFDT	No	The as of date specified by the user on the run control page. The value is the same for every row. Simplifies finding related displays and descriptions.
BENEFIT_PLAN		Coverage_Elect = <i>E</i> indicates an enrollment. Coverage_Elect = <i>T</i> indicates that the plan is being terminated. If the field is blank and Coverage_Elect = <i>T</i> or <i>W</i>, this indicates that there was no prior enrollment.
SETID		Comes from the benefit plan definition. It is blank for 7X plans.
VENDOR_ID		Blank for 7X plans.

Column	Key	Notes
GROUP_NBR		Blank for 7X plans.
COVRG_CD		Applies only to 1X plan types.
LIFE_ADD_COVRG		Applies only to 2X plan types. This is the code from the plan definition, not an employee enrollment.
COVERAGE_BEGIN_DT		For enrollments, indicates the first day of coverage. For terminations, indicates the first day that coverage is no longer in effect.
COVERAGE_ELECT_DT		Indicates the date that this enrollment/termination was entered into the system.
DEDUCTION_BEGIN_DT		For enrollments, indicates the first day that deductions and credits are in effect. For terminations, it indicates the first day deductions and credits should stop.
ENROLLMENT_DT		Original enrollment date (coverage begin date) for this plan. This is the earliest continuous coverage begin date for this same benefit plan, ignoring change of coverage code (1x) and coverage amount (2x). Populated only if the INCLUDE_ORIG option is selected, and only for employee-level rows where COVERAGE_ELECT = E.
ANNUAL_PLEDGE		Applies only to 6x plan types.
FLAT_DED_AMT		Applies only to 4x plan types. Zero if employee is not contributing on a before-tax basis or contributing a percent of earnings.
PCT_GROSS		Applies only to 4x plan types. Zero if employee is not contributing on a before-tax basis or contributing a flat amount.

Column	Key	Notes
FLAT_DED_AMT_ATA		Applies only to 4x plan types. Zero if employee is not contributing on an after-tax basis or contributing a percent of earnings.
PCT_GROSS_ATA		Applies only to 4x plan types. Zero if employee is not contributing on an after-tax basis or contributing a flat amount.
VOLUNTARY_AMT		Applies only to 8x plan types. Zero if employee is not contributing a voluntary flat amount or is contributing a voluntary percentage of earnings.
VOLUNTARY_PCT		Applies only to 8x plan types. Zero if employee is not contributing a voluntary percentage of earnings or is contributing a voluntary flat amount.
VACN_HOURS		Applies only to 9x plan types.
VACN_BUY_FLAT_AMT		Applies only to 9x plan types.
VACN_SELL_FLAT_AMT		Applies only to 9x plan types.
BENEF_PCT		Applies only to beneficiary records in plan types 2x, 4x, or 8x. Zero if the beneficiary allocation is a flat amount.
FLAT_AMOUNT		See the Flat Amount Field section following this table.
FACTOR_XSALARY		Applies only to employee records for 2x plan types. This field contains the salary factor coverage defined at either the plan level or employee level.

Column	Key	Notes
EXCESS		Applies only to 2x, non-dependent plans and 8x dependent records. A Y in the field indicates that this beneficiary is to receive any excess benefit distribution.
CONTINGENT		Applies only to 2x, non-dependent plans and 8x dependent records. A Y in the field indicates that this beneficiary is a contingent beneficiary.
DED_CUR		The amount of the last payroll deduction calculated for this enrollment. This field is populated only if INCLUDE_DED is selected.
PAY_END_DT		The pay end date of the last payroll deduction calculated for this enrollment. This field is populated only if INCLUDE_DED is selected.
CALCULATED_BASE		Applies only to 2x and 3x plans and only if Calculate Life/Disability Covg is selected on the Enrollment Reporting page. This field is zero for dependents and beneficiaries and for employees with Sum of Dependent Coverage elections for Dependent Life/AD&D plans. This field indicates the calculated benefit amount with respect to coverage minimum/maximum, multiple jobs, and rounding rules, for coverage purposes.
PREMIUM_BASE		Applies only to 2x and 3x plans and only if Calculate Life/Disability Covg is selected on the Enrollment Reporting page. This field is zero for dependents and beneficiaries and for employees with Sum of Dependent Coverage elections for dependent life/AD&D plans. This field indicates the calculated benefit amount with respect to coverage minimum/maximum, multiple jobs, and rounding rules, for premium purposes.

Column	Key	Notes
HLTH_PROVIDER_ID		Applies only to 1x plan types. This field indicates the primary care physician.
PREVIOUSLY_SEEN		Applies only to 1x plan types.
DEPBEN_RIDER_FLG		Applies only to dependents and beneficiaries. <i>Y</i> indicates that this coverage or allocation is court-ordered.
CALC_RULES_ID		Applies only to 2x and 3x plans and only if Calculate Life/Disability/Covg is selected on the Enrollment Reporting page. Identifies the calculation rule to use when calculating CALCULATED_BASE and PREMIUM_BASE.

Flat Amount Field

This field has different meanings depending upon the plan type and the plan context. In general, this field represents a flat amount of Life/AD&D coverage defined at either the plan level or the employee level; the amount may be in addition to a factor of salary coverage. For dependent life and dependent AD&D plans, it may represent the amount of coverage elected for a particular dependent. For non-dependent Life/AD&D plans and pension plans, it may represent a flat amount beneficiary allocation.

The following tables exhibit how this field is used in each context. For Life/AD&D plans, each column represents the value of LIFE_ADD_COVRG, which defines how the coverage is calculated for a plan.

Non-Dependent Life/AD&D Plan Types

Participant	Flat Amount	Flat + Factor	EE-Specified	Special Calc	Sum of Dependents
Employee	Flat amount of coverage	Flat amount portion of total coverage	Flat amount, or flat amount portion of total coverage	Zero (not applicable)	Zero (not applicable)
Dependent /Beneficiary	Beneficiary allocation (if flat amount)	Beneficiary allocation (if flat amount)	Beneficiary allocation (if flat amount)	Beneficiary allocation (if flat amount)	Zero (not applicable)

Dependent Life and Dependent AD&D

Participant	Flat Amount	Flat + Factor	EE-Specified	Special Calc	Sum of Dependents
Employee	Flat amount of coverage for each dependent	Flat amount portion of total coverage for each dependent	Flat amount, or flat amount portion of total coverage for each dependent	Zero (not applicable)	Zero
Dependent /Beneficiary	Zero (not applicable)	Zero (not applicable)	Zero (not applicable)	Zero (not applicable)	This dependent's coverage

Pension Plans

Participant	Description
Employee	Zero (not applicable)
Dependent/Beneficiary	Beneficiary allocation (if flat amount allocation is elected)

Sending Data to Benefit Providers

After the Enrollment Reporting Snapshot process runs, you are ready to send enrollment data to your plan providers. There are two ways to send this information:

- Run the appropriate SQR Provider Extract process to create a provider extract file.
- Use PeopleSoft's Carrier Reporting process in eBenefits.

See Also

PeopleSoft 8.8 eBenefits PeopleBook, "Working With Suppliers," Integrating With eBenX

Creating SQR Provider Extracts

Provider requirements for enrollment data are seldom the same. PeopleSoft Human Resources Base Benefits business process includes a set of sample extract SQR programs that you can modify for your providers. Each sample SQR program:

- Includes a realistic set of data fields for the associated plan types.
- Records a history of each execution.
- Sends an enrollment termination to a provider only once.

After determining file layout requirements for your providers, clone the appropriate sample SQR program for each file layout you need and make any necessary changes using the database record layout information for BN_SNAP_PER, BN_SNAP_JOB, and BN_SNAP_PLAN.

There are four sample SQRs and two library files:

- BEN102.SQR: sample file extract for health (1x) plans.
- BEN103.SQR: sample file extract for life/AD&D (2x) plans.
- BEN104.SQR: sample file extract for disability (3x) plans.
- BEN105.SQR: sample file extract for savings (4x) plans.
- BENCRFNC.SQC: library of useful functions for developing provider extracts.
- BENCRTBL.SQC: library of internal cache tables.

Running Carrier Extracts

Create a flat file that can be sent to your plan providers. Use the Health, Life/ADD, Disability, Savings Extract, or your own provider-specific pages to do this.

If you rerun an extract because of a problem and have set up the extract to send terminations only once, delete the run history record for this extract on the Run History page before running the extract again.

(USF) Sending FEHB Data to the OPM

Federal agencies must send quarterly reports to major FEHB providers. These reports enable the provider to compare their enrollment records with the agency's records.

To send FEHB data to the OPM:

1. Identify the employees and dependents who are enrolled in Medicare A, Medicare B, and Champus plans using the Benefits Person Data and the Federal Medicare Flags pages.
2. Run the FEHB Carrier Interface process to extract the data and write it to the extract file.
3. Send the data by running the Run Carrier Reporting Schedule.
4. Review the data using the Gvt Int Hist (Government Interface History) page or the FEHB Reconciliation report.

See Also

[Chapter 7, "Entering Dependent and Beneficiary Information," \(USF\) Entering Medicare Flags, page 115](#)

[Chapter 8, "Enrolling Participants," \(USF\) Enrolling Participants Into FEHB Benefit Programs and Plans, page 136](#)

Pages Used Send FEHB Data to the OPM

Page Name	Object Name	Navigation	Usage
Run FEHB Interface	GVT_RUN_FGBN001	Benefits, Interface with Providers, FEHB Carrier Interface	Extract data to send to the OPM.
Run Carrier Interface Schedule	BN_M_RUN_CNTL	Benefits, Interface with Providers, Transmit Enrollments to eBenx	Sends data to the OPM.
Gvt Int Hist (government interface history)	GVT_INT_HIST	Benefits, Interface with Providers, Review FEHB Interface History	Review data in the extract file.

Glossary of PeopleSoft Terms

absence entitlement	This element defines rules for granting paid time off for valid absences, such as sick time, vacation, and maternity leave. An absence entitlement element defines the entitlement amount, frequency, and entitlement period.
absence take	This element defines the conditions that must be met before a payee is entitled to take paid time off.
account	You use an account code to record and summarize financial transactions as expenditures, revenues, assets, or liabilities balances. The use of this delivered PeopleSoft ChartField is typically defined when you implement PeopleSoft General Ledger.
accounting class	In PeopleSoft Enterprise Performance Management, the accounting class defines how a resource is treated for generally accepted accounting practices. The Inventory class indicates whether a resource becomes part of a balance sheet account, such as inventory or fixed assets, while the Non-inventory class indicates that the resource is treated as an expense of the period during which it occurs.
accounting date	The accounting date indicates when a transaction is recognized, as opposed to the date the transaction actually occurred. The accounting date and transaction date can be the same. The accounting date determines the period in the general ledger to which the transaction is to be posted. You can only select an accounting date that falls within an open period in the ledger to which you are posting. The accounting date for an item is normally the invoice date.
accounting entry	A set of related debits and credits. An accounting entry is made up of multiple accounting lines. In most PeopleSoft applications, accounting entries are always balanced (debits equal credits). Accounting entries are created to record accruals, payments, payment cancellations, manual closures, project activities in the general ledger, and so forth, depending on the application.
accounting split	The accounting split method indicates how expenses are allocated or divided among one or more sets of accounting ChartFields.
accumulator	You use an accumulator to store cumulative values of defined items as they are processed. You can accumulate a single value over time or multiple values over time. For example, an accumulator could consist of all voluntary deductions, or all company deductions, enabling you to accumulate amounts. It allows total flexibility for time periods and values accumulated.
action reason	The reason an employee's job or employment information is updated. The action reason is entered in two parts: a personnel action, such as a promotion, termination, or change from one pay group to another and a reason for that action. Action reasons are used by PeopleSoft Human Resources, PeopleSoft Benefits Administration, PeopleSoft Stock Administration, and the COBRA Administration feature of the Base Benefits business process.
activity	In PeopleSoft Enterprise Learning Management, an instance of a catalog item delivery method it may also be called a class. The activity defines such things as meeting times and locations, instructors, reserved equipment and materials, and detailed costs that are associated with the offering, enrollment limits and deadlines, and waitlisting capacities.
allocation rule	In PeopleSoft Enterprise Incentive Management, an expression within compensation plans that enables the system to assign transactions to nodes and participants. During transaction allocation, the allocation engine traverses the compensation structure

	from the current node to the root node, checking each node for plans that contain allocation rules.
alternate account	A feature in PeopleSoft General Ledger that enables you to create a statutory chart of accounts and enter statutory account transactions at the detail transaction level, as required for recording and reporting by some national governments.
application agent	An application agent is an online agent that is loaded into memory with a PeopleSoft page. It detects when a business rule has been triggered and determines the appropriate action.
asset class	An asset group used for reporting purposes. It can be used in conjunction with the asset category to refine asset classification.
attachment	In PeopleSoft Enterprise Learning Management, nonsystem-defined electronic material that supplements a learning resource, such as an equipment items user handbook or the site map of a large facility.
background process	In PeopleSoft, background processes are executed through process-specific COBOL programs and run outside the Windows environment.
benchmark job	In PeopleSoft Workforce Analytics, a benchmark job is a job code for which there is corresponding salary survey data from published, third-party sources.
branch	A tree node that rolls up to nodes above it in the hierarchy, as defined in PeopleSoft Tree Manager.
budgetary account only	An account used by the system only and not by users; this type of account does not accept transactions. You can only budget with this account. Formerly called system-maintained account.
budget check	In commitment control, the processing of source transactions against control budget ledgers, to see if they pass, fail, or pass with a warning.
budget control	In commitment control, budget control ensures that commitments and expenditures don't exceed budgets. It enables you to track transactions against corresponding budgets and terminate a document's cycle if the defined budget conditions are not met. For example, you can prevent a purchase order from being dispatched to a vendor if there are insufficient funds in the related budget to support it.
budget period	The interval of time (such as 12 months or 4 quarters) into which a period is divided for budgetary and reporting purposes. The ChartField allows maximum flexibility to define operational accounting time periods without restriction to only one calendar.
business event	In PeopleSoft Sales Incentive Management, an original business transaction or activity that may justify the creation of a PeopleSoft Enterprise Incentive Management event (a sale, for example).
catalog item	In PeopleSoft Enterprise Learning Management, a specific topic that a learner can study and have tracked. For example, Introduction to Microsoft Word. A catalog item contains general information about the topic and includes a course code, description, categorization, keywords, and delivery methods.
category	In PeopleSoft Enterprise Learning Management, a way to classify catalog items so that users can easily browse and search relevant entries in the learning catalog. Categories can be hierarchical.
ChartField	A field that stores a chart of accounts, resources, and so on, depending on the PeopleSoft application. ChartField values represent individual account numbers, department codes, and so forth.
ChartField balancing	You can require specific ChartFields to match up (balance) on the debit and the credit side of a transaction.

ChartField combination edit	The process of editing journal lines for valid ChartField combinations based on user-defined rules.
ChartKey	One or more fields that uniquely identify each row in a table. Some tables contain only one field as the key, while others require a combination.
child	In PeopleSoft Tree Manager trees, a child is a node or detail on a tree linked to another, higher-level node (referred to as the parent). Child nodes can be rolled up into the parent. A node can be a child and a parent at the same time depending on its location within the tree.
Class ChartField	A ChartField value that identifies a unique appropriation budget key when you combine it with a fund, department ID, and program code, as well as a budget period. Formerly called <i>sub-classification</i> .
clone	In PeopleCode, to make a unique copy. In contrast, to <i>copy</i> may mean making a new reference to an object, so if the underlying object is changed, both the copy and the original change.
collection	To make a set of documents available for searching in Verity, you must first create at least one collection. A collection is set of directories and files that allow search application users to use the Verity search engine to quickly find and display source documents that match search criteria. A collection is a set of statistics and pointers to the source documents, stored in a proprietary format on a file server. Because a collection can only store information for a single location, PeopleSoft maintains a set of collections (one per language code) for each search index object.
compensation object	In PeopleSoft Enterprise Incentive Management, a node within a compensation structure. Compensation objects are the building blocks that make up a compensation structure's hierarchical representation.
compensation structure	In PeopleSoft Enterprise Incentive Management, a hierarchical relationship of compensation objects that represents the compensation-related relationship between the objects.
configuration parameter catalog	Used to configure an external system with PeopleSoft. For example, a configuration parameter catalog might set up configuration and communication parameters for an external server.
configuration plan	In PeopleSoft Enterprise Incentive Management, configuration plans hold allocation information for common variables (not incentive rules) and are attached to a node without a participant. Configuration plans are not processed by transactions.
content reference	Content references are pointers to content registered in the portal registry. These are typically either URLs or iScripts. Content references fall into three categories: target content, templates, and template pagelets.
context	In PeopleSoft Enterprise Incentive Management, a mechanism that is used to determine the scope of a processing run. PeopleSoft Enterprise Incentive Management uses three types of context: plan, period, and run-level.
corporate account	Equivalent to the Account ChartField. Distinguishes between the chart of accounts typically used to record and report financial information for management, stockholders, and the general public, as opposed to a chart of statutory (alternate) accounts required by a regulatory authority for recording and reporting financial information.
cost profile	A combination of a receipt cost method, a cost flow, and a deplete cost method. A profile is associated with a cost book and determines how items in that book are valued, as well as how the material movement of the item is valued for the book.
cost row	A cost transaction and amount for a set of ChartFields.

data acquisition	In PeopleSoft Enterprise Incentive Management, the process during which raw business transactions are acquired from external source systems and fed into the operational data store (ODS).
data elements	Data elements, at their simplest level, define a subset of data and the rules by which to group them. For Workforce Analytics, data elements are rules that tell the system what measures to retrieve about your workforce groups.
data row	Contains the entries for each field in a table. To identify each data row uniquely, PeopleSoft applications use a key consisting of one or more fields in the table.
data validation	In PeopleSoft Enterprise Incentive Management, a process of validating and cleansing the feed data to resolve conflicts and make the data processable.
DAT file	This text file, used with the Verity search engine, contains all of the information from documents that are searchable but not returned in the results list.
delivery method	In PeopleSoft Enterprise Learning Management, identifies a learning activity's delivery method type. An activity can have one or more delivery methods.
delivery method type	In PeopleSoft Enterprise Learning Management, specifies a method that your organization uses to deliver learning activities, for example, scheduled or self-paced learning.
distribution	The process of assigning values to ChartFields. A distribution is a string of ChartField values assigned to items, payments, and budget amounts.
double byte character	If you're working with Japanese or other Asian employees, you can enter the employee's name using double-byte characters. The standard double byte character set name format in PeopleSoft applications is: [last name] space [first name].
dynamic tree	A tree that takes its detail values directly from a table in the database, rather than from a range of values entered by the user.
edit table	A table in the database that has its own record definition, such as the Department table. As fields are entered into a PeopleSoft application, they can be validated against an edit table to ensure data integrity throughout the system.
effective date	A method of dating information in PeopleSoft applications. You can predate information to add historical data to your system, or postdate information in order to enter it before it actually goes into effect. By using effective dates, you don't delete values; you enter a new value with a current effective date.
EIM job	Abbreviation for <i>Enterprise Incentive Management job</i> . In PeopleSoft Enterprise Incentive Management, a collection of job steps that corresponds to the steps in an organization's compensation-related business process. An EIM job can be stopped to allow manual changes or corrections to be applied between steps, and then resumed from where it left off, continuing with the next step. A run can also be restarted or rolled back.
EIM ledger	Abbreviation for <i>Enterprise Incentive Management ledger</i> . In PeopleSoft Enterprise Incentive Management, an object to handle incremental result gathering within the scope of a participant. The ledger captures a result set with all of the appropriate traces to the data origin and to the processing steps of which it is a result.
equipment	In PeopleSoft Enterprise Learning Management, resource items that can be assigned to a training facility, to a specific training room, or directly to an activity session. Equipment items are generally items that are used (sometimes for a fee) and returned after the activity is complete.

event	Events are predefined points either in the application processor flow or in the program flow. As each point is encountered, the event activates each component, triggering any PeopleCode program associated with that component and that event. Examples of events are FieldChange, SavePreChange, and OnRouteSubscription. In PeopleSoft Human Resources, <i>event</i> also refers to incidents that affect benefits eligibility.
event propagation process	In PeopleSoft Sales Incentive Management, a process that determines, through logic, the propagation of an original PeopleSoft Enterprise Incentive Management event and creates a derivative (duplicate) of the original event to be processed by other objects. Sales Incentive Management uses this mechanism to implement splits, roll-ups, and so on. Event propagation determines who receives the credit.
external system	In PeopleSoft, any system that is not directly compiled with PeopleTools servers.
fact	In PeopleSoft applications, facts are numeric data values from fields from a source database as well as an analytic application. A fact can be anything you want to measure your business by, for example, revenue, actual, budget data, or sales numbers. A fact is stored on a fact table.
filter	In PeopleSoft applications, a filter creates a subset of information. Filters are used in templates to limit your information from a pick list of attribute values.
generic process type	In PeopleSoft Process Scheduler, process types are identified by a generic process type. For example, the generic process type SQR includes all SQR process types, such as SQR process and SQR report.
group	Any set of records associated under a single name or variable in order to run calculations in PeopleSoft business processes. In PeopleSoft Time and Labor, for example, employees are placed in groups for time reporting purposes.
homepage	Users can personalize the homepage, or the page that first appears when they access the portal.
incentive object	In PeopleSoft Enterprise Incentive Management, the incentive-related objects that define and support the PeopleSoft Enterprise Incentive Management calculation process and results, such as plan templates, plans, results data, user interaction objects, and so on.
incentive rule	In PeopleSoft Sales Incentive Management, the commands that act on transactions and turn them into compensation. A rule is one part in the process of turning a transaction into compensation.
key	One or more fields that uniquely identify each row in a table. Some tables contain only one field as the key, while others require a combination.
learner group	In PeopleSoft Enterprise Learning Management, a group of learners within the same learning environment that share the same attributes, such as department or job code.
learning activity	See <i>activity</i> .
learning history	In PeopleSoft Enterprise Learning Management, a self-service repository for all of a learner's completed learning activities.
learning plan	In PeopleSoft Enterprise Learning Management, a self-service repository for all of a learner's planned and in-progress learning activities.
ledger mapping	You use ledger mapping to relate expense data from general ledger accounts to resource objects. Multiple ledger line items can be mapped to one or more resource IDs. You can also use ledger mapping to map dollar amounts (referred to as <i>rates</i>) to business units. You can map the amounts in two different ways: an actual amount that represents actual costs of the accounting period, or a budgeted amount that can be used to calculate the capacity rates as well as budgeted model results. In PeopleSoft Enterprise Warehouse, you can map general ledger accounts to the EW Ledger table.

level	A section of a tree that organizes groups of nodes.
library section	In PeopleSoft Enterprise Incentive Management, a section that is defined in a plan (or template) and that is available for other plans to share. Changes to a library section are reflected in all plans that use it.
linked section	In PeopleSoft Enterprise Incentive Management, a section that is defined in a plan template but appears in a plan. Changes to linked sections propagate to plans using that section.
linked variable	In PeopleSoft Enterprise Incentive Management, a variable that is defined and maintained in a plan template and that also appears in a plan. Changes to linked variables propagate to plans using that variable.
load	The feature that initiates a process to automatically load information into a PeopleSoft application for example, populating the PeopleSoft Benefits database with plan-level election information.
local functionality	In PeopleSoft HRMS, the set of information that is available for a specific country. You can access this information when you click the appropriate country flag in the global window, or when you access it by a local country menu.
location	Locations enable you to indicate the different types of addresses for a company, for example, one address to receive bills, another for shipping, a third for postal deliveries, and a separate street address. Each address has a different location number. The primary location indicated by a <i>1</i> is the address you use most often and may be different from the main address.
market template	In PeopleSoft Enterprise Incentive Management, additional functionality that is specific to a given market or industry and is built on top of a product category.
material	In PeopleSoft Enterprise Learning Management, a resource item that can be assigned to the sessions of an activity. Material items are generally consumed during the duration of an activity and not returned, and they may have an associated cost.
message definition	An object definition specified in PeopleSoft Application Designer that contains message information for PeopleSoft Application Messaging.
meta-SQL	Meta-SQL constructs expand into platform-specific SQL substrings. They are used in functions that pass SQL strings, such as in SQL objects, the SQLExec function, and PeopleSoft Application Engine programs.
metastring	Metastrings are special expressions included in SQL string literals. The metastrings, prefixed with a percent (%) symbol, are included directly in the string literals. They expand at run time into an appropriate substring for the current database platform.
multibook	Processes in PeopleSoft applications that can create both application entries and general ledgers denominated in more than one currency.
multicurrency	The ability to process transactions in a currency other than the business unit's base currency.
objective	In PeopleSoft Enterprise Learning Management, an individual's learning goal. An example of a learning goal is a competency gap.
override	In PeopleSoft Enterprise Incentive Management, the ability to make a change to a plan that applies to only one plan context.
pagelet	Each block of content on the homepage is called a pagelet. These pagelets display summary information within a small rectangular area on the page. The pagelet provide users with a snapshot of their most relevant PeopleSoft and non-PeopleSoft content.

parent node	A tree node linked to lower-level nodes or details that roll up into it. A node can be a parent and a child at the same time, depending on its location within the tree.
participant	In PeopleSoft Enterprise Incentive Management, participants are recipients of the incentive compensation calculation process.
participant object	Each participant object may be related to one or more compensation objects. See also <i>participant object</i> .
payout	In PeopleSoft Enterprise Incentive Management, the resulting incentive plan computation that is provided to payroll.
PeopleCode	PeopleCode is a proprietary language, executed by the PeopleSoft application processor. PeopleCode generates results based upon existing data or user actions. By using business interlink objects, external services are available to all PeopleSoft applications wherever PeopleCode can be executed.
PeopleCode event	An action that a user takes upon an object, usually a record field, that is referenced within a PeopleSoft page.
PeopleSoft Internet Architecture	The fundamental architecture on which PeopleSoft 8 applications are constructed, consisting of an RDBMS, an application server, a Web server, and a browser.
performance measurement	In PeopleSoft Enterprise Incentive Management, a variable used to store data (similar to an aggregator, but without a predefined formula) within the scope of an incentive plan. Performance measures are associated with a plan calendar, territory, and participant. Performance measurements are used for quota calculation and reporting.
period context	In PeopleSoft Enterprise Incentive Management, because a participant typically uses the same compensation plan for multiple periods, the period context associates a plan context with a specific calendar period and fiscal year. The period context references the associated plan context, thus forming a chain. Each plan context has a corresponding set of period contexts.
per seat cost	In PeopleSoft Enterprise Learning Management, the cost per learner, based on the total activity costs divided by either minimum attendees or maximum attendees. Organizations use this cost to price PeopleSoft Enterprise Learning Management activities.
plan	In PeopleSoft Sales Incentive Management, a collection of allocation rules, variables, steps, sections, and incentive rules that instruct the PeopleSoft Enterprise Incentive Management engine in how to process transactions.
plan context	In PeopleSoft Enterprise Incentive Management, correlates a participant with the compensation plan and node to which the participant is assigned, enabling the PeopleSoft Enterprise Incentive Management system to find anything that is associated with the node and that is required to perform compensation processing. Each participant, node, and plan combination represents a unique plan context if three participants are on a compensation structure, each has a different plan context. Configuration plans are identified by plan contexts and are associated with the participants that refer to them.
plan section	In PeopleSoft Enterprise Incentive Management, a segment of a plan that handles a specific type of event processing.
plan template	In PeopleSoft Enterprise Incentive Management, the base from which a plan is created. A plan template contains common sections and variables that are inherited by all plans that are created from the template. A template may contain steps and sections that are not visible in the plan definition.
portal registry	In PeopleSoft applications, the portal registry is a tree-like structure in which content references are organized, classified, and registered. It is a central repository that

	defines both the structure and content of a portal through a hierarchical, tree-like structure of folders useful for organizing and securing content references.
private view	A user-defined view that is available only to the user who created it.
process	See <i>Batch Processes</i> .
process definition	Process definitions define each run request.
process instance	A unique number that identifies each process request. This value is automatically incremented and assigned to each requested process when the process is submitted to run.
process job	You can link process definitions into a job request and process each request serially or in parallel. You can also initiate subsequent processes based on the return code from each prior request.
process request	A single run request, such as an SQR, a COBOL program, or a Crystal report that you run through PeopleSoft Process Scheduler.
process run control	A PeopleTools variable used to retain PeopleSoft Process Scheduler values needed at runtime for all requests that reference a run control ID. Do not confuse these with application run controls, which may be defined with the same run control ID, but only contain information specific to a given application process request.
product category	In PeopleSoft Enterprise Incentive Management, indicates an application in the Enterprise Incentive Management suite of products. Each transaction in the PeopleSoft Enterprise Incentive Management system is associated with a product category.
publishing	In PeopleSoft Enterprise Incentive Management, a stage in processing that makes incentive-related results available to participants.
record definition	A logical grouping of data elements.
record field	A field within a record definition.
record group	A set of logically and functionally related control tables and views. Record groups help enable TableSet sharing, which eliminates redundant data entry. Record groups ensure that TableSet sharing is applied consistently across all related tables and views.
record input VAT flag	Abbreviation for <i>record input value-added tax flag</i> . Within PeopleSoft Purchasing, Payables, and General Ledger, this flag indicates that you are recording input VAT on the transaction. This flag, in conjunction with the record output VAT flag, is used to determine the accounting entries created for a transaction and to determine how a transaction is reported on the VAT return. For all cases within Purchasing and Payables where VAT information is tracked on a transaction, this flag is set to Yes. This flag is not used in PeopleSoft Order Management, Billing, or Receivables, where it is assumed that you are always recording only output VAT, or in PeopleSoft Expenses, where it is assumed that you are always recording only input VAT.
record output VAT flag	Abbreviation for <i>record output value-added tax flag</i> . See <i>record input VAT flag</i> .
reference data	In PeopleSoft Sales Incentive Management, system objects that represent the sales organization, such as territories, participants, products, customers, channels, and so on.
reference object	In PeopleSoft Enterprise Incentive Management, this dimension-type object further defines the business. Reference objects can have their own hierarchy (for example, product tree, customer tree, industry tree, and geography tree).
reference transaction	In commitment control, a reference transaction is a source transaction that is referenced by a higher-level (and usually later) source transaction, in order to

	automatically reverse all or part of the referenced transaction's budget-checked amount. This avoids duplicate postings during the sequential entry of the transaction at different commitment levels. For example, the amount of an encumbrance transaction (such as a purchase order) will, when checked and recorded against a budget, cause the system to concurrently reference and relieve all or part of the amount of a corresponding pre-encumbrance transaction, such as a purchase requisition.
relationship object	In PeopleSoft Enterprise Incentive Management, these objects further define a compensation structure to resolve transactions by establishing associations between compensation objects and business objects.
results management process	In PeopleSoft Sales Incentive Management, the process during which compensation administrators may review processing results, manually change transactions, process draws, update and review payouts, process approvals, and accumulate and push payments to the EIM ledger.
role user	A PeopleSoft Workflow user. A person's role user ID serves much the same purpose as a user ID does in other parts of the system. PeopleSoft Workflow uses role user IDs to determine how to route worklist items to users (through an email address, for example) and to track the roles that users play in the workflow. Role users do not need PeopleSoft user IDs.
role	Describes how people fit into PeopleSoft Workflow. A role is a class of users who perform the same type of work, such as clerks or managers. Your business rules typically specify what user role needs to do an activity.
roll up	In a tree, to roll up is to total sums based on the information hierarchy.
routing	Connects activities in PeopleSoft Workflow. Routings specify where the information goes and what form it takes email message, electronic form, or worklist entry.
run control	A run control is a type of online page that is used to begin a process, such as the batch processing of a payroll run. Run control pages generally start a program that manipulates data.
run control ID	A unique ID to associate each user with his or her own run control table entries.
run-level context	In PeopleSoft Enterprise Incentive Management, associates a particular run (and batch ID) with a period context and plan context. Every plan context that participates in a run has a separate run-level context. Because a run cannot span periods, only one run-level context is associated with each plan context.
search query	You use this set of objects to pass a query string and operators to the search engine. The search index returns a set of matching results with keys to the source documents.
section	In PeopleSoft Enterprise Incentive Management, a collection of incentive rules that operate on transactions of a specific type. Sections enable plans to be segmented to process logical events in different sections.
security event	In commitment control, security events trigger security authorization checking, such as budget entries, transfers, and adjustments; exception overrides and notifications; and inquiries.
self-service application	Self-service refers to PeopleSoft applications that are accessed by end users with a browser.
session	In PeopleSoft Enterprise Learning Management, a single meeting day of an activity (that is, the period of time between start and finish times within a day). The session stores the specific date, location, meeting time, and instructor. Sessions are used for scheduled training.
session template	In PeopleSoft Enterprise Learning Management, enables you to set up common activity characteristics that may be reused while scheduling a PeopleSoft Enterprise

	Learning Management activity characteristics such as days of the week, start and end times, facility and room assignments, instructors, and equipment. A session pattern template can be attached to an activity that is being scheduled. Attaching a template to an activity causes all of the default template information to populate the activity session pattern.
setup relationship	In PeopleSoft Enterprise Incentive Management, a relationship object type that associates a configuration plan with any structure node.
sibling	A tree node at the same level as another node, where both roll up into the same parent. A node can be a sibling, parent, and child all at the same time, depending on its location in the tree.
single signon	With single signon, users can, after being authenticated by a PeopleSoft application server, access a second PeopleSoft application server without entering a user ID or password.
source transaction	In commitment control, any transaction generated in a PeopleSoft or third-party application that is integrated with commitment control and which can be checked against commitment control budgets. For example, a pre-encumbrance, encumbrance, expenditure, recognized revenue, or collected revenue transaction.
SpeedChart	A user-defined shorthand key that designates several ChartKeys to be used for voucher entry. Percentages can optionally be related to each ChartKey in a SpeedChart definition.
SpeedType	A code representing a combination of ChartField values. SpeedTypes simplify the entry of ChartFields commonly used together.
SQR	See <i>Structured Query Report (SQR)</i> .
statutory account	Account required by a regulatory authority for recording and reporting financial results. In PeopleSoft, this is equivalent to the Alternate Account (ALTACCT) ChartField.
step	In PeopleSoft Sales Incentive Management, a collection of sections in a plan. Each step corresponds to a step in the job run.
Structured Query Report (SQR)	A type of printed or displayed report generated from data extracted from a PeopleSoft SQL-based relational database. PeopleSoft applications provide a variety of standard SQRs that summarize table information and data. You can use these reports as is, customize them, or create your own.
Summary ChartField	You use summary ChartFields to create summary ledgers that roll up detail amounts based on specific detail values or on selected tree nodes. When detail values are summarized using tree nodes, summary ChartFields must be used in the summary ledger data record to accommodate the maximum length of a node name (20 characters).
summary ledger	An accounting feature used primarily in allocations, inquiries, and PS/nVision reporting to store combined account balances from detail ledgers. Summary ledgers increase speed and efficiency of reporting by eliminating the need to summarize detail ledger balances each time a report is requested. Instead, detail balances are summarized in a background process according to user-specified criteria and stored on summary ledgers. The summary ledgers are then accessed directly for reporting.
summary tree	A tree used to roll up accounts for each type of report in summary ledgers. Summary trees enable you to define trees on trees. In a summary tree, the detail values are really nodes on a detail tree or another summary tree (known as the <i>basis</i> tree). A summary tree structure specifies the details on which the summary trees are to be built.

table	The underlying PeopleSoft data format, in which data is stored by columns (fields) and rows (records, or instances).
TableSet sharing	Specifies control table data for each business unit so that redundancy is eliminated.
target currency	The value of the entry currency or currencies converted to a single currency for budget viewing and inquiry purposes.
template	A template is HTML code associated with a Web page. It defines the layout of the page and also where to get HTML for each part of the page. In PeopleSoft, you use templates to build a page by combining HTML from a number of sources. For a PeopleSoft portal, all templates must be registered in the portal registry, and each content reference must be assigned a template.
territory	In PeopleSoft Sales Incentive Management, hierarchical relationships of business objects, including regions, products, customers, industries, and participants.
TimeSpan	A relative period, such as year-to-date or current period, that can be used in various PeopleSoft General Ledger functions and reports when a rolling time frame, rather than a specific date, is required. TimeSpans can also be used with flexible formulas in PeopleSoft Projects.
transaction allocation	In PeopleSoft Enterprise Incentive Management, the process of identifying the owner of a transaction. When a raw transaction from a batch is allocated to a plan context, the transaction is duplicated in the PeopleSoft Enterprise Incentive Management transaction tables.
transaction loading process	In PeopleSoft Enterprise Incentive Management, the process during which transactions are loaded into Sales Incentive Management. During loading, the source currency is converted to the business unit currency while retaining the source currency code. At the completion of this stage, the transaction is in the first state.
transaction state	In PeopleSoft Enterprise Incentive Management, a value assigned by an incentive rule to a transaction. Transaction states enable sections to process only transactions that are at a specific stage in system processing. After being successfully processed, transactions may be promoted to the next transaction state and picked up by a different section for further processing.
transaction type	In PeopleSoft Enterprise Incentive Management, a way to categorize transactions to identify specific transaction types (for example, shipment, order, opportunity, and so on). Plan sections process only one type of transaction type. Transaction types can be defined based on a company's specific processes model.
Translate table	A system edit table that stores codes and translate values for the miscellaneous fields in the database that do not warrant individual edit tables of their own.
tree	The graphical hierarchy in PeopleSoft systems that displays the relationship between all accounting units (for example, corporate divisions, projects, reporting groups, account numbers) and determines roll-up hierarchies.
unclaimed transaction	In PeopleSoft Enterprise Incentive Management, a transaction that is not claimed by a node or participant after the allocation process has completed, usually due to missing or incomplete data. Unclaimed transactions may be manually assigned to the appropriate node or participant by a compensation administrator.
uniform resource locator (URL)	In PeopleSoft, the term URL refers to the entire query string. The following is an example of a URL: <code>http://serverx/InternetClient/InternetClientServlet?ICType=Script&ICScriptProgramName=WEBLIB_BEN_401k.PAGES.FieldFormula.iScript_Home401k</code>
universal navigation header	Every PeopleSoft portal includes the universal navigation header, intended to appear at the top of every page as long as the user is signed on to the portal. In addition to

providing access to the standard navigation buttons (like Home, Favorites, and signoff) the universal navigation header can also display a welcome message for each user.

URL

See *uniform resource locator (URL)*.

user interaction object

In PeopleSoft Sales Incentive Management, used to define the reporting components and reports that a participant can access in his or her context. All Sales Incentive Management user interface objects and reports are registered as user interaction objects. User interaction objects can be linked to a compensation structure node through a compensation relationship object (individually or as groups).

variable

In PeopleSoft Sales Incentive Management, the intermediate results of calculations. Variables hold the calculation results and are then inputs to other calculations. Variables can be plan variables that persist beyond the run of an engine or local variables that exist only during the processing of a section.

warehouse

A PeopleSoft data warehouse that consists of predefined ETL maps, data warehouse tools, and DataMart definitions.

worksheet

A way of presenting data through a PeopleSoft Business Analysis Modeler interface that enables users to do in-depth analysis using pivoting tables, charts, notes, and history information.

workflow

The background process that creates a list of administrative actions based on selection criteria and specifies the procedure associated with each action.

worklist

The automated to-do list that PeopleSoft Workflow creates. From the worklist, you can directly access the pages you need to perform the next action, and then return to the worklist for another item.

zero-rated VAT

Abbreviation for *zero-rated value-added tax*. A VAT transaction with a VAT code that has a tax percent of zero. Used to track taxable VAT activity where no actual VAT amount is charged.

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